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Title:

**The Lunacy Commission 1845-60, with special reference to the implementation of
policy in Kent and Surrey**

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Volume 2

Volume 2

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FOOTNOTES - INTRODUCTION

- 1) Bingley, W, 'Mental Health Act Commission: The Cavalry is cantering rather than charging,' in Community Care (1985) 7 Feb. William Bingley is the Legal Director of Mind.
- 2) Dickens, C, Little Dorrit, Chapter 10; Balzac, H de, Les Employes (1836) (Transl. by Marriage, E, London 1898) p.84. Balzac stated that clerks were no longer under the control of magistrates, instead, 'Bureaucracy, the giant power wielded by pygmies, came into the world....Bureaucracy was a predilection for categorical statements and reports, a government as fussy and meddlesome, in short, as a shopkeeper's wife.'
- 3) Mill's earlier work had drawn on Coleridge's ideas of a clerisy, advocating the recruitment of men of initiative into the government service. He believed that some functions of the clerisy could be undertaken by the more able civil servants. By the time he wrote Representative Government, he saw democracy as liable to stagnation. His writings reflected the dilemma facing all utilitarians: to what extent had the expert civil servant the right to maximise the general good, if in so doing, he transgressed the rights of individuals; Sir James Stephen, the Colonial Office administrator also argued that one would not find intellectual cavalry in dull routine-ised occupations.
- 4) Albrow, M, Bureaucracy, p.17.
- 5) See the back of this thesis for a published article concerning this society.
- 6) MacDonagh, O, A Pattern of Government Growth 1800-60: The Passenger Acts and their Enforcement.
- 7) National Register of Archives, Diaries of the Seventh Earl of Shaftesbury, SHA/PD/7, 3 Sep 1855.
- 8) Parry Jones, W L, The Trade in Lunacy: A Study of Private Madhouses in England in the Eighteenth and Nineteenth Centuries.

FOOTNOTES - CHAPTER 1

- 1) Showalter, 'Victorian Women and Insanity,' in Scull (ed), Madhouses, Mad-Doctors and Madmen. See also Winslow, 'Woman in Her Psychological Relations,' in J. Psych. Med., (1851) Vol IV, pp.8-50.
- 2) Screech, 'Good Madness in Christendom,' in Bynum, Porter and Shepherd (eds) The Anatomy of Madness: Essays in the History of Psychiatry Vol I, chapter 1; See also Screech, Ecstasy and the Praise of Folly passim; For a contemporary account expressing a similar idea see Adams, T, Mystical Bedlam, or the world of Mad Men, 1615 This was a sermon suggesting that all sin was madness; It is interesting to note that Martin Luther was subject to all sorts of fantastic hallucinations of the Devil.
- 3) Foucault, Madness and Civilization chapter 1.
- 4) MacDonald, Mystical Bedlam: Madness, Anxiety and Healing in Sixteenth Century England passim.
- 5) See Deutch, The Mentally Ill in America: A History of their Care and Treatment from Colonial Times p.13; In Sixteenth Century England a favourite prescription for 'gathering the remembrance of a lunatic' was to beat and cudgel him until he regained his reason. Sir Thomas More recommended scourging for lunatics, writing of one, 'I caused him to be taken by the constables and bound to a tree in the street before the whole town, and there striped him till he waxed weary. Verily, God be thanked, I hear no harm of him now.'
- 6) Burton, The Anatomy of Melancholy, (1621) p.79; Scott, Discoverie of Witches, (1584) Scott was a more enlightened commentator who wrote that many accused of witchcraft needed the help of a physician, not the attentions of a torturer or executioner.
- 7) Bakewell, A Letter addressed to the Chairman of the Select Committee of the House of Commons appointed to inquire into the State of Madhouses p.12.
- 8) Willis, An Essay on the Pathology of the Brain and Nervous Stock (1667) in Hunter and Macalpine, Three Hundred Years of Psychiatry pp.191-4; See also discussion in Doerner, Madmen and the Bourgeoisie: A Social History of Insanity and Psychiatry pp.131-3.
- 9) Lovejoy, The Great Chain of Being.
- 10) Doerner, Madmen pp.54-95 and 190-96; Scull, Museums of Madness: The Social Organization of Insanity in Nineteenth Century England pp.18-48; Mellett, The Prerogatives of Asylums chapters 2 and 3.
- 11) Locke, An Essay Concerning Human Understanding Chapter 33, pp.250-52. Locke gave a good description of the effects of habitual ruminatory associations in the depression of a woman who had lost her child, see p.253.
- 12) Porter, 'The Rage of Party: A Glorious Revolution in English Psychiatry,' in Medical History (1983) 27, pp.35-39.

13) For discussion of the revolt against religious enthusiasm during this period see Rosen, 'Enthusiasm: a dark lanthorn of the spirit,' in Bull. Hist. Med. (1958) xlii, pp.393-421; William, 'The Restoration revolt against enthusiasm,' in Studies in Philology (1933) xxx, pp.571-603.

14) See Moore, Backgrounds of English Literature 1700-60 chapter 5, 'The English Malady.'

15) Cheyne, The English Malady p.104 and 261; Mandeville, A Treatise of the Hypochondriack and Hysterick Passions pp.149-52; Blackmore, A Treatise of the Spleen or Vapours p.90; Stukeley, Of the Spleen, its description and history p.66; See also Doerner, Madmen, pp.28-30.

16) Sterne acknowledged his own great debt to Locke's associationism.

17) For an example of this see, Exe Vale Wonford Hospital, Exeter, Records of Bowhill House, St Thomas's Hospital, Governor's Committee Minutes, Vol I, 15 Mar 1803, 'It has been a commonly received Opinion, which has been productive of the very worst consequences, that Medical Aid can be but of little advantage in Mental Derangements. The many Institutions however which have of late years been established throughout England for the reception of Persons thus severely afflicted, and from whence great numbers have been restored to their friends and to Society by proper Medical Treatment, now clearly evince the Opinion is founded in Error.' The Governors went on to say that they wished to introduce more Gentlemen of the Faculty to the study of this neglected branch of Physic.

18) Walk, 'Some Aspects of the Moral Treatment of the Insane up to 1854,' in J.M.Sc. (1954) Vol C, No.42, pp.808-815; Parry Jones, The Trade in Lunacy chapters 3 and 4; Doerner, Madmen pp.39-47 and 73.

19) See Bynum, 'Rationales for Therapy in British Psychiatry 1780-1835,' in Scull, Madhouses, Mad-Doctors and Madmen.

20) Battie, A Treatise on Madness pp.60-88.

21) Cullen, First Lines of the Practice of Physic.

22) Hunter and Macalpine, George III and the Mad Business pp.270-72; Also Pargeter, Observations on Maniacal Disorders pp.127-34.

23) Millingen, Mind and Matter illustrated by Considerations on Hereditary Insanity pp.45, 216-30; A similar argument was used to suggest that there was less mental illness in quiet rural areas. See Burrows, Commentaries on the Causes, Forms, Symptoms and Treatment, Moral and Medical, of Insanity p.242.

24) The 'egotistical sublime' of Keats was one expression of this, as were the self destructive behaviour of Byron, Coleridge and Shelley.

25) Bradley, The Call to Seriousness: The Evangelical Impact on the Victorians passim.

26) Pinel believed that the Revolution in France had produced mental alienation by unleashing extreme passions, but also felt it had brought an awareness of the need for order and education. There is some evidence that at a later date, and on a lesser scale, Chartism was believed to have had a similar effect: see The Wellcome Institute, Camberwell House Medical Casebooks, 1847, entry for, Ann Jamieson 10 May 1848 for whom the predisposing cause of illness was stated to be, 'dread of a Chartist meeting which was to take place in the neighbourhood of her residence.'

27) For discussion of this see, Taylor, Laissez-Faire and State Intervention in Nineteenth Century Britain chapter 6.

28) Millingen, Mind and Matter pp.246-456.

29) Prichard, A Treatise on Insanity and Other Disorders affecting the Mind pp.253-61.

30) Burrows, Commentaries pp.204-20; Prichard, A Treatise on Insanity pp.180-230. Prichard was very keen on Pinel's idea of a sympathetic cerebral disease, arising as a result of a sanguineous organism suffusing the brain. See Pinel, A Treatise on Insanity pp.174-209; Maddock, Practical Observations on Mental and Nervous Disease pp.31-33, 106-8 and 178-215.

31) See Maddock, Practical Observations p.79 for the quotation of Cheyne in the mid-nineteenth century.

32) Seymour, Thoughts on the Nature and Treatment of diseases of the Human Body Vol I, p.153; Haslam, A Letter to the Metropolitan Commissioners in Lunacy containing some strictures on the Act of Parliament and Observations on their Report pp.2-4; Prichard, A Treatise on Diseases of the Nervous System pp.315-17; Also the Lunacy Commissioners' Further Report 1847, for a later complaint of the same kind;

33) Digby, Madness, Morality and Medicine: A Study of the York Retreat 1796-1914 p.123.

34) Most of the treatments used in psychiatry at this time were employed for a wide range of other physical illnesses. This was particularly true of bleeding, and the use of purgatives and opiates.

35) Digby, Madness, Morality and Medicine passim; Digby, 'Moral Treatment at the Retreat 1796-1846' and Godlee, 'Aspects of non-conformity: Quakers and the lunatic fringe' in Bynum, Porter and Shepherd, The Anatomy of Madness Vol II, chapters 3 and 4; Tuke, Description of the Retreat (1813); Foucault, Madness and Civilization chapter 9; Doerner, Madmen and the Bourgeoisie, pp.77-82.

36) For accounts of the Retreat's influence see, Scull, 'The Discovery of the Asylum Revisited: Lunacy Reform in the New American Republic,' in Scull (ed), Madhouses, Mad-Doctors and Madmen; Also Digby, Madness, Morality and Medicine chapter 10.

37) Godlee, 'Aspects of non-conformity' pp.79-82.

- 38) Szasz, The Myth of Mental Illness passim.
- 39) Cooter, 'Phrenology and British Alienists 1825-45' in Scull, Madhouses, Mad-Doctors and Madmen.
- 40) The concept of monomania disappeared in the 1850s at about the same time as the demise of phrenology. Phrenology also provided a convenient explanation for the phenomenon of patients who received brain damage but could still function normally.
- 41) Michael Clark has argued precisely this of the somaticism in later Victorian psychiatry, which rejected mesmerism as well as phrenology as a psychological form of treatment, because of its lack of professional scientific basis and credibility. He maintained that psychological methods could only be used in the late nineteenth century in diagnosis, as to use them as a form of treatment raised the possibility that the very conditions on which the success of such treatments seemed to depend might themselves comprise a form of mental disorder: see Clark, 'The Rejection of Psychological Approaches to Mental Disorder in late Nineteenth Century British Psychiatry' in Scull, Madhouses, Mad-Doctors and Madmen.
- 42) For an account of John Conolly see: Scull, 'A Victorian Alienist: John Conolly' in Bynum, Porter and Shepherd, Vol 2, chapter 5.
- 43) Hill, A Lecture on the Management of Lunatic Asylums and the Treatment of the Insane passim; Hill, Total Abolition of Personal Restraint in the Treatment of the Insane; Charlesworth, Considerations on the Moral Management of Insane Persons passim; For Conolly's own account see, Conolly, Treatment of the Insane without Mechanical Restraint.
- 44) Lancet 21 Jan 1840, 7 Nov 1840 and 22 May 1841.
- 45) Scull, 'The Domestication of Madness' in Medical History (1983) 27, pp.233-48; For advertising see, Medical Directory 1856 advertisements for Effra House, Brixton and Church Street House, Epsom.
- 46) Nancy Tomes is currently making a study of the non-restraint movement in the United States; Tomes, A Generous Confidence. Thomas Story Kirkbride and the art of Asylum-keeping 1840-1883.
- 47) This was a common theme, not only amongst medical practitioners but also addressed by lay persons. See, Barlow, On Man's Power Over Himself to Prevent or Control Insanity pp.32-4; Abercrombie, The Culture and Discipline of the Mind pp.5-16 and 24-32; Millingen, Mind and Matter pp.457-9; Burrows, Commentaries pp.16, 44 and 54.
- 48) Prichard, A Treatise on Insanity pp.279-84, 286-90 and 292-96.
- 49) E J Seymour and H H Southey, were involved in the use of private lodgings for psychiatric patients. Seymour, Thoughts on the Nature of Illness pp.215-17; Southey for example signed an affidavit for a patient in lodgings in 1853, see PRO/C211/30. It is also likely that T Turner, J Bright and C Hewett were involved in arranging lodgings for patients.

50) For evidence of this see Chapter 2. See also Curry (ed), New Letters of Robert Southey, p.465, Southey to C W W Wynn (a future Metropolitan Lunacy Commissioner) Dec 1807, 'Thank you for the Lunatic Report; it is humane and wise. Protestant Establishments do not make enough use of religion - hospitals and such asylums as these never can be so well superintended as by those who do it for the love of God.'

51) Conolly, The Indications of Insanity p.481.

52) Dickens, Our Mutual Friend chapter XI.

53) In this thesis the words Board and Commission have been used interchangeably, as they were by contemporaries. There is some discussion later however, about the difference between those which were in effect Ministries, and those which were not. See also, Willson, 'Ministries and Boards: Some Aspects of Administrative Development since 1832' in Public Administration (1955) xxxiii.

54) See Parris, Constitutional Bureaucracy: The Development of British Central Administration since the Eighteenth Century; Also Chester, The English Administrative System 1780-1870.

55) The attacks made on government when it tried to expand the Lunacy Commission in 1842 and 1845 were led by radicals like Sharman Crawford, Thomas Wakley, Thomas Duncombe and Benjamin Hawes who implied that the Metropolitan Commissioners were inefficient placemen who were lining their own pockets. See chapter 2 of this thesis.

56) PP 1836 Vol IV, p.669.

57) For the above figures I am grateful to Roberts, Victorian Origins of the British Welfare State pp.13-17; For specialised studies of central government offices see, Donajgrotski, The Home Office Clerks, and Pellew, The Home Office 1848-1914 from Clerks to Bureaucrats; Prouty, The Transformation of the Board of Trade; Jones, The Nineteenth Century Foreign Office an Administrative History; Wright Treasury Control of the Civil Service 1854-74.

58) There were several exceptions to this among which were the Lunacy Commission, the Ecclesiastical Commission, the Charity Commission and the Civil Service Commission.

59) For example the Tithe Commission, the Ecclesiastical Commission and the Emigration Commission.

60) The Andover workhouse scandal occurred in 1845/6 when it emerged that starving paupers in this Hampshire workhouse were fighting each other for the rotting magotty bones, which it was their job to crush into manure.

61) The First Commissioner of Woods and Forests was in a doubly invidious position, as he could also be outvoted at the Board of Woods and Forests, where there were two permanent commissioners who were ineligible to sit as M.P.s. Although he was a Minister, he had no definite veto over his colleagues, and all the Board's decisions were subject to the Treasury's approval.

62) Hansard 3rd Series, Vol xxxv, cols.418-429 and 1159-1170; PRO/T/30/22/7, Memorandum by Charles Trevelyan, 26 Apr 1848.

63) This animal is variously referred to as being of four and five years standing as well. Cf. Johnston, England As It Is Vol II, pp.150-1.

64) Perkin, The Origins of Modern English Society pp.319-23, 325-6 and 338.

65) For Bentham's influence on Victorian Administration see, Roberts, 'Jeremy Bentham and the Victorian Administrative State' in Victorian Studies (1958-9) II, pp.193-210; MacDonagh, 'A Nineteenth Century Revolution in Government: a Reappraisal' in H.J. (1958) I, pp.52-67; and Hume, 'Jeremy Bentham and the Nineteenth Century Revolution in Government' in H.J. (1967) X, 4, pp.361-375.

66) Stark (ed), Jeremy Bentham's Economic Writings 3 Vols. Despite this Bentham did support private joint stock companies taking over prisons on a Panopticon design, rather than have them run by the government.

67) Zangerl, 'The Social Composition of the County Magistracy in England and Wales 1831-87' in J.Brit.Stud. (1972) II; For businessmen in parliament see Perkin, The Origins of Modern English Society pp.428-436; Cranfield, The Press and Society chapter 6; For various societies see Cullen, The Statistical Movement in Early Victorian Britain: The Foundations of Empirical Social Research chapters 6, 7 and 8, Davies, John Forster: A Literary Life pp.97-8 for the Guild of Literature; For the professions see Millerson, The qualifying Professions, Reader, Professional Men pp.119-127, and Newman, The Evolution of Medical Education in the Nineteenth Century.

68) In 1827 Lord Liverpool's long term of office as Prime Minister came to a close, in many respects symbolising the demise of the old order, a time in which the leader of the government saw himself primarily as the servant of the Crown.

69) For discussion see Bradley, The Call to seriousness; Also Brown, The Fathers of the Victorians: The Age of Wilberforce pp.35-150.

70) All the above were known to different Lunacy Commissioners. Chadwick and Southwood Smith were known to Shaftesbury, Proctor and Forster all of whom helped the latter raise money for his nursing home. These two were probably known to other Metropolitan Lunacy Commissioners who were also members of the London Statistical Society. Leonard Horner served on the Factory Commission with the Lunacy Commissioner Francis Bisset Hawkins (both these men were also members of the Committee of the London Statistical Society) and had attended meetings at the house of another Lunacy Commissioner. Kay Shuttleworth was known to Shaftesbury because of their mutual interest in public health.

71) Smith, Government by Commissions Illegal and Pernicious: The Nature and Effects of all Commissions of Inquiry and other Crown appointed Commissions passim. See other titles by Smith in the Bibliography.

72) PRO/HO45/OS/7102, John Perceval to George Clive, 2 May 1861, appealed to Magna Carta and the universal meaning of laws as found in Montesquieu. For comparison see the petition of William Morgan to the House of Lords in 1847 (JHL, LXXXIX, 1847, p.159) There is an interesting discussion of the appeal to traditional constitutional rights in the context of opposition to central government, in Lubenow, The politics of government growth: early Victorian attitudes toward state intervention 1833-48 passim; See also Perceval, Letters to Sir James Graham upon the reform of the law affecting the treatment of persons alleged to be of unsound mind Letter dated Jun 1844, 'for my own part I do not approve of Commissions of this kind, for the administration of the laws of this country, more particularly where they interfere with the ordinary channels of government.'

73) The Times 28 Aug 1846.

74) Lytton, England and the English Vol 2, p.308; Lytton also believed Bentham was the most influential teacher of the Age, see Vol 2, p.106.

75) Hervey, Bowhill House, St Thomas's Hospital for Lunatics, Asylum for the Four Western Counties 1801-69 pp.50-1.

76) Royal College of Physicians Edinburgh, The Diaries of Sir Alexander Morison, see entries for 18 Aug 1848 and 21 Apr 1849 for dividends of £31 and £25 16s 6d on lunatic stock from Messrs. Moxon's. Also 22 Jun 1846 for Dr Costello trying to interest Morison in Joint Stock Lunatic Asylum shares of £25 each for Wyke House Asylum.

77) See chapter 4.

78) MacMillan & Co. Ltd., The Political Economy Club.

79) 'Nassau Senior and Classical Economics 1937, Part II, chapter I, pp.237-81' in Bowley (ed), Nassau Senior Lectures 1847-52, Course I, Lecture 6.

80) Several of the Industrial magnates were also influential as asylum visitors. Lord Wharnccliffe for example was Chairman of the West Riding County Asylum Visitors. In the 1830s the latter refused to licence private houses for public pauper patients, according to Thomas Heywood, On the Want of Remedial Treatment for the Poor of Unsound Mind p.55. He also helped promote the County asylum bill in 1845; The Peels were involved in the Staffordshire County Asylum.

81) For further discussion of this issue see, Lewis, Edwin Chadwick and the Public Health Movement 1832-54 pp.33-57; Also Lambert, Sir John Simon 1816-1904 and English Social Administration pp.61-62.

82) MacDonagh, Early Victorian Government 1830-70 pp.80-88; Lubenow, The Politics of Government Growth p.126; also MacDonagh, 'Coal Mines Regulation: The First Decade 1842-52' in Robson (ed), Ideas and Institutions of Victorian Britain;

83) Willson, 'Ministries and Boards' in Public Administration (1955) xxxiii, p.43.

84) Dicey, Lectures upon the relation between Law and Public Opinion in England in the Nineteenth Century.

85) Perkin, 'Individualism Versus Collectivism in Nineteenth-Century Britain: A False Antithesis' in J.Brit.Stud. (1977) xvii, p.105. Perkin remarked that it was surprising Dicey, 'could not find a great thinker on whom to serve an affiliation order for fathering collectivism.' See also, MacDonagh, 'The Nineteenth Century Revolution in Government: A Reappraisal' in H.J. (1958) I, pp.55-56.

86) Brebner, 'Laissez -Faire and State Intervention in Nineteenth Century Britain,' in J.Econ.Hist. (1948) viii, p.62.

87) Roberts, Origins of the British Welfare State passim.

88) MacDonagh, A Pattern of Government Growth 1800-60.

89) Hart, 'Nineteenth Century Social Reform: A Tory Interpretation of History,' in Past and Present (1965) xxxi. Included amongst these are D Roberts, Dr Kitson Clark, Professor W L Burn and Dr R J Lambert.

90) Much of the debate centered on whether Bentham believed there were good reasons why the legislature should refrain from meddling in the economy. His general utilitarian principles do not indicate any clear inclination towards laissez-faire or intervention. Werner Stark's edition of Bentham's economic writings (see footnote 66) makes it clear that he was never a consistent supporter of laissez-faire.

91) Parris, 'The Nineteenth Century Revolution in Government: A Reappraisal Reappraised,' in H.J. (1960) III, 1.

92) Taylor, Laissez-Faire and State Intervention. Also Lubenow, The Politics of Government Growth.

93) Finer, 'The Transmission of Benthamite Ideas 1820-50' in Sutherland (ed), Studies in the Growth of Nineteenth Century Government.

94) Hume, 'Jeremy Bentham' in H.J. (1967) X, 4.

95) Perkin, The origins of Modern English Society. Also, 'Individualism Versus Collectivism' in J.Brit.Stud. (1977) xvii, p.105.

96) Kitson Clark, 'Statesmen in Disguise: Reflexions on the History of the Neutrality of the Civil Service,' in H.J. (1959) II, 1.

97) Mellett, 'Bureaucracy and Mental Illness: The Commissioners in Lunacy 1845-90,' in Medical History (1981) III.

98) Roberts, 'Jeremy Bentham and the Victorian Administrative State,' in Victorian Studies (1958-9) II, pp.196.

99) For discussion of Forster's contacts with Benthamites and Benthamism, see Chapter 3.

FOOTNOTES - CHAPTER 2

- 1) Biographical details for the Metropolitan Lunacy Commission and its successor the Lunacy Commission (1845-60) are in Appendices A, C and D. These also give the length of service of each Commissioner.
- 2) Defoe, Augusta Triumphans pp.30-34. The history of ex-patients campaigning against the practices of madhouses also started at this time. See, Cruden, The London citizen exceedingly injured: or a British inquisition display'd. See footnote 139.
- 3) Smollett, The adventures of Sir Launcelot Greaves Vol 2, pp.228-230.
- 4) For a description of this process see Mellett, The Prerogative of Asylumdom, introduction and pp.187-210. Also Scull, Museums of Madness chapter 5.
- 5) Hunter and Macalpine, Three Hundred Years of Psychiatry 1535-1860 pp.451-56.
- 6) Madhouses became known as licensed houses or private asylums in the nineteenth century. The terms are interchangeable and have been used in this way throughout, although the former came to be used mostly in a pejorative sense.
- 7) These men will be referred to as the College commissioners hereafter.
- 8) 14 Geo III c.49, ss.XXVIII: XVI and XXVI for refusing admittance.
- 9) 14 Geo III c.49, ss.I, XXI and XXXII. The magistrates in the provinces were also expected to use the fees collected from licences to fund prosecutions. Once again these sums were quite inadequate; s.XXI required a return to the Commissioners of all patients admitted in the London area within three days of admission; and s.XXVII a return from all provincial asylums to the Commissioners within 14 days. This was rarely done except from houses near to London.
- 10) 14 Geo III c.49, ss.XV, XVII and XXIV.
- 11) PP (1814-15) IV, pp.43-44.
- 12) The Diaries of E T Monro from 1808-1833 in private hands in Sevenoaks, Kent. These illustrate that many physicians who acted as Commissioners had had patients at Monro's asylum, Brooke House. Among these were Halford, Powell, Tierney, Baillie, Heberden, Maton, Bree and Hue to name but a few.
- 13) Royal College of Physicians, Uncatalogued papers on lunacy, Ms. Chart showing holders of the offices of Censor and Commissioner for Lunatics 1771-1817. Figures for post-1817 were taken from the Imperial Calendar.
- 14) For an example of the position of psychiatry within the profession see, Anon, Familiar Views of Lunacy and Lunatic Life

p.39, 'the great bulk of medical practitioners still continue, as they have done hitherto, to avoid connecting their names at all closely with the subject of lunacy.'

15) Monro Diaries: 16 Aug 1811 dining with Dr Pemberton who was a College Commissioner; and similarly with the following, 29 Sep 1815 with Drs Latham and Turner; 23 Dec 1820 with Warren and Nevinson; 30 Sep 1825 with Turner and Halford; and 25 Jul 1826 with Heberden.

16) Monro Diaries, 25 Jul 1826, Consultation with Halford who was a Commissioner at the time.

17) The Monro Diaries illustrate how widespread were the contacts London practitioners had. In 1822 for example, Monro travelled down to the West Country via Witney Asylum, Oxfordshire, visiting a patient in Cheltenham and then attending a 'commission de lunatico' in Tewkesbury, before staying at Brislington House in Bristol. He also did joint consultations with Dr Sutherland in Guildford, and had patients in Hertfordshire and Essex. See also Halford's Papers, Leicestershire CRO, for consultations on patients outside London, DG24/793/3 re. Lady Westmoreland and DG24/905/1-4, re. Lord Derby.

18) Pepys, Warren, Halford and Heberden were College Commissioners interested in Mental illness, all of whom increased their standing by attendance on the King at different periods of his illness. Monro too was consulted about the King. See Hunter and Macalpine, George III and the Mad Business pp.161 and 190. Also Monro Diaries, 4 Aug 1811 for his summons by the Queen.

19) PRO/HO44/51, List of Peckham House patients and the names of those who signed their certificates.

20) PP (1826-7) VI, pp.182-84.

21) The Metropolitan Lunacy Commissioners Spencer Perceval and Frederick Calthorpe knew E T Monro from Harrow speech days, Monro Diaries 5 Jun 1823; Sir R Inglis and Colonel Clitherow knew him because they were Bethlem governors; J R Hume the only commissioner who was a surgeon, knew the madhouse owner J G Millingen well through having served with him in the Peninsular War. See Millingen, A Letter to the Rate-Payers of the County of Middlesex for a testimonial Hume gave Millingen on 17 Mar 1838 for the Hanwell post. Millingen dedicated his book, Aphorisms on the Treatment and Management of the Insane to Hume.

22) Sir George Henry Rose see Appendix D. Rose served on the Select Committees concerning Lunacy in 1807, 1815 and 1827. C W W Wynn was the only other man to do so.

23) Some members of this group, notably Wynn, Wilberforce, Romilly, Rose and Whitbread had sat on the Select Committee to examine the state of Criminal and Pauper Lunatics, in 1807. That Committee was the result of a campaign by the Benthamite Sir G O Paul to remove criminal lunatics from the prison system and resulted in permissive legislation allowing for the erection of county asylums. In 1813 some of them also tried to raise a subscription for an asylum for 400 patients near the Metropolis based on the York Retreat, Peel MSS, 40856, Dec 1813, John Hone to Edward Wakefield; One or two in

conjunction with Lord Robert Seymour were responsible for a campaign in 1819 to obtain a resident chaplain at Bethlem, Peel MSS, 40271, ff.230-33, Seymour to Peel, 6 Nov 1817.

24) The Times 20 Jun 1814; Quarterly Review (1816) Vol 15, Review of a pamphlet entitled, Observations on the Law relative to Private Lunatic Asylums p.415.

25) PP 1814-15, IV, pp.15-18.

26) PP 1814-15, IV, pp.27-30.

27) A couple of these bills envisaged that responsibility in the Metropolitan areas of Essex, Middlesex, Kent and Surrey would be shared between the Commission and the Knights of the Shire elected by the counties in question. This arrangement was proposed, because it was also mooted that these counties should subsidise the College of Physicians financially, if the expenses for administration of the law in these districts should leave them in debt.

28) PP 1813-14, (204), I, p.426, and PP 1813-14, (267), I, p.445, Clause D.

29) PP 1813-14, (108), I, p.402, Clause B, and for the opposition to the Commission's requests in the 1850s for this information see, The Medical Circular (1856) Vol 9, pp.2-10.

30) PP 1813-14, (204), I, s.13; Clauses 2, 3, 5 and 6; and s.23; PP 1816 (40), II, 493-513, s.21 (left out in the Bill of May 31st 1816) The medical officer was supposed to be resident if there were over 49 patients in the house.

31) PP 1816, (493), II, Clause A; PP 1813-14, (267), I, ss.15 and 19; PP 1816, (407), II, s.47 and PP 1816, (493), II, Clauses I and J.

32) The Times 20 Jun 1814, XYZ attacked the College accusing its members of agrandisement in promoting Rose's bills, which sought to widen its powers.

33) Burrows, Cursory Remarks on a Bill Now in the House of Peers for the Regulating of Madhouses pp.19-22.

34) Hansard HL, XL, 1819, pp.1345-46, 24th Jun.

35) The Lunacy Commissioner B W Procter remarked on the appearance of Eldon's biography that he was, 'a stuffy, canting, cringing, sordid old rogue....[with whose opinions]....I would not have identified myself....for anything.' Peel MSS, 34624, f.543, Procter to MacVey Napier, Jul 1844; The future Commissioner, John Forster, had no love for Eldon either. As literary editor of the Examiner he endorsed a fierce satire on Eldon by W S Landor, in August 1836.

36) University College London, Brougham MSS, 44208, Letter from Dillon to Brougham, 14 Dec 1832. See also PP 1826-27, VI, pp.57-60. Dillon was very critical of the College Commissioners, and suggested public asylums managed by magistrates were the answer.

37) HCJ, Vol 36, 1828, pp.85 and 411. Gordon was the only member of the Select Committee who helped prepare both bills.

38) William Macmichael (1784-1839) Banker's son. Ch Ch Oxford, MD 1816; FRCP 1818. Physician to the Middlesex Hospital 1822-31; was on close terms with a number of madhouse owners, and from 1833-37 was a Lord Chancellor's Visitor to Chancery patients. College Commissioner 1827-28. Physician Extraordinary to Geo III in 1829. Turner (1776-1865) has been confused with the surgeon Thomas Turner (1793-1873) who pioneered medical schools in Manchester. See Mellett, 'Bureaucracy and Mental Illness: The Commissioners in Lunacy 1845-90,' in Medical History (1981) July, biog. appendix.

39) Lord Shaftesbury, Spencer Perceval, Robert Gordon, Charles Wynn, Calthorpe, Rose and Baring all became Metropolitan Lunacy Commissioners. T H Villiers did not. Three other members of the Select Committee became Commissioners, Granville Somerset, T B Lennard and C N Pallmer.

40) PP HL CCXXXVII, p.1, Minutes of evidence taken before the Select Committee of the House of Lords to whom were referred the bill entitled An Act to Regulate the Care and Treatment of Insane Persons p.19.

41) PP 1826-27, VI, Garret Dillon's evidence.

42) PP HL CCXXXVII, pp.99 and 65.

43) Turner acted as a College Commissioner in 1811, 1812, 1813 and 1824. For his evidence see PP HL CCXXXVII, pp.102-3.

44) The Ultras included Lord Eldon, Lord Farnborough, Lord Keynon (Chairman), Lord Colchester and Viscount Melville.

45) PP HL CCXXXVII, pp.75-6; See also Royal College of Physicians, Uncatalogued MSS, Letter from Dr J Latham to Dr W Macmichael, 30 May 1828, sending a paper of observations on several Commissions of Lunacy, 'as the subject has never yet appeared (as far as I recollect of our transactions) to have engaged the particular attention of the College.' Also Halford MSS, DG24/802/2, n.d. Dr T Hume to Halford, enclosing a newspaper cutting reporting Halford's talk to the College on moral treatment. Among those present were the Lord Chancellor Henry Brougham, Lord Melbourne, the Chief Justice of the Court of Common Pleas. This paper was given in 1832.

46) Monro Diaries, 1828. Monro consulted regularly with Drs A J Sutherland, G M Burrows, E L Fox, G G Bompas and J Willis, all prominent madhouse owners. He called on Lord Malmesbury with Dr Willis, and himself approached the Lord Chancellor Lord Lyndhurst, Robert Gordon, the Bishop of Llandaff and the Home Secretary Robert Peel. Entries dated 17 Mar, 25 Mar, 3 Apr, 12 Apr, 29 Apr, 15 May, 16 May and 17 May.

47) Only 15 asylums were built under this act between 1828 and 1845. In 1808 there had been an earlier county asylums act, also permissive. This resulted from the Select Committee of 1807. Six counties built asylums under this Act.

48) See Appendix B for the changing composition of the Commission between 1828 and 1845.

49) 9 Geo IV c.41, ss.2, 17, 20, 37, 29, 30, 32, 35, 38 and 44.

50) PP 1859 1st Sess III, p.2.; Nicoll, An Inquiry into the Present State of Visitation in Asylums for the Reception of the Insane and into the modes by which such visitation may be improved p.89.

51) Peel MSS, 40397, f.206, letter from Peel to Gordon, 1 Aug 1828; ff.210-12, Peel to G Somerset, 2 Aug 1828. Peel having informed Somerset of his inadvertent offer to Gordon, before receiving a reply from the latter, asked whether Somerset would accept the chairmanship if Gordon declined. He also had the nerve to ask if Somerset would serve under Gordon.

52) Halford MSS, DG24/872, Letters from Peel to Halford, 2 Aug 1828; Halford to Peel, 23 Aug 1828 and 5 Aug 1828. Peel asked for Halford's opinion on several doctors who had approached him for Commissioners' posts, including A Halliday, J A Gordon and W Lambe. Halford however recommended staunch College men: Turner, Bright and Southey, who were chosen; and Macmichael and Hewett (who became a Metropolitan Lunacy Commissioner in 1839). These two he later recommended to Brougham as Lord Chancellor's Visitors of Lunatics. There were four others: F Hawkins who got a post in 1842, Dr Chambers, Sir M Tierney and Dr Whitlock Nicholl. Another who applied was Dr John Forbes, see Peel MSS, 40397, f.234, Forbes to Peel, 12 Aug 1828.

53) Peel MSS, 40397, f.206, Peel to Gordon, 1 Aug 1828; 40397, f.210-12, Peel to Granville Somerset, 2 Aug 1828. See this letter also for reference to consultation with Shaftesbury over Bright's appointment. In his letter he asked G Somerset, 'What Medical Authorities can I safely consult? if reference to medical authorities as to the character and competency of candidates be requisite.'

54) Others who subsequently applied for posts as they became vacant included Sir A Morison (see Brougham MSS, 42467, 21 Jul 1832. Also applications in 1831 and 1833); Sir George Tuthill, Brougham MSS, 46030, 13 Aug 1833, and 46757, 19 Jan 1834, Tuthill to Brougham; James Veitch, Brougham MSS, 42769, 4 Aug 1832, Veitch to Brougham. Veitch claimed as his experience of psychiatry that he had been responsible for the naval lunatics at Sir John Miles' asylum at Hoxton.

55) Drever worked in the Staffordshire area, Peel's home county.

56) Peel MSS, 40397, f.210-12, Peel to Somerset, 2 Aug 1828; Also 40397, f.236, Peel to Gordon, 13 Aug 1828; Hampshire CRO, Calthorpe MSS, 26/M/62, F/C, 1201, 20 Jul 1828 Calthorpe to Browne to thank him for his efforts on the Committee, with a testimonial from the other Committee members.

57) Bartholomew Bouverie, Frederick Byng, Charles Ross and William Ward.

- 58) The fellow magistrates suggested by Gordon, namely Bouverie, Hampson and Clitherow all had evangelical leanings.
- 59) Halford MSS, DG24/835/1, Report on and suggested regulations for the keeping of lunatics, n.d.
- 60) 9 Geo IV c.41, ss.II,XVII, XXXIX, XLII and XXVI.
- 61) G Somerset, Jr Ld of Treasury 1828-30; F T Baring, Ld of Treasury 1830-32; R Vernon Smith, Jr Ld of Treasury 1830-34; E A Seymour, 12th Duke of Somerset, Ld of Treasury 1835-39; R Gordon, Sec. to Treasury 1839-41; and J M Gaskell, Ld of Treasury 1841-45. This leverage was used on several occasions to promote a stringent retrenchment, as Dubois, a later secretary testified in a letter to Brougham in 1834. He remarked, 'I have but one complaint to make against the Commissioners - it is a shabby affair. Having on the sudden to provide offices for their meetings, I could get none fit for less than £80 p.a., and the allowance is only £50. I brought this before the Board, but could not move them - If I had been there under Tory auspices, I am satisfied that a prayer so reasonable [that the Commission and not he pay the £30 difference] would not have been met with such fierce conservative virtue. Dr Southey said to me privately - Bum Gordon is dead against you.' Brougham MSS, 43398, Dubois to Brougham, 9 Aug 1834.
- 62) Haslam, A Letter to the Metropolitan Commissioners in Lunacy containing some strictures on the Act of Parliament and observations on their Report, p.23.
- 63) Leicestershire CRO, Halford MSS, DG24/895/2, Marquess of Lansdowne to Halford, 24 Aug 1830.
- 64) Haslam, A Letter to the Metropolitan Commissioners, pp.3 and 9.
- 65) Seymour, Thoughts on the Nature and Treatment of Diseases of the Human Body, p.158.
- 66) PP 1830 XXX, Report of the Metropolitan Commissioners in Lunacy made to the Rt Hon Robert Peel, 1 Jul 1829, p.10.
- 67) National Register of Archives, Diaries of the Seventh Earl of Shaftesbury, SHA/PD/3, 15 Nov 1844. The complete unfitness of William Godwin for this post badly dented Shaftesbury's confidence in his own judgment.
- 68) RCP, Uncatalogued MSS on Lunacy, G Somerset to Bright, 28 Aug 1828, asking him to forward the Commissioners' papers to R Browne. See also RCP to the Lunacy Commission 18 Sep 1878 concerning papers still at the College.
- 69) HO119/5, for detailed reports of these investigations, and the dreadful conditions, 20 Apr 1829 and 22 Apr 1829.
- 70) PRO, HO43/37, Peel to Browne, 13 Jul 1829. Peel felt their firm start would lead to many improvements in the condition of the insane.

Also See LC Further Report 1847, App G, pp.348-9. For original reports see HO44/51, Peckham House improvements recorded in Jul 1829.

Also Brougham MSS, 46757, 14 Jan 1831, G Somerset to Brougham's Secretary of Lunatics L A Lowdham.

71) Brougham MSS, 44556, Shaftesbury to Brougham, 20 Feb 1833; 43992, Shaftesbury to Brougham, 20 May 1833.

72) Buckinghamshire CRO, Freemantle MSS, D/FR/130/8, Secretary of the Lunatics Office to Sir T F Freemantle asking if he wished to continue in office as a Metropolitan Lunacy Commissioner, 29 Aug 1832. In reply Freemantle stated that he hadn't fulfilled his duties because of pressure of parliamentary business.

73) The most important of these were Sir R Inglis, Sir G Grey and E A Seymour.

74) Hart, 'Nineteenth Century Social Reform,' in Past and Present (1965) xxxi, p.42.

75) Roberts, Origins of the Welfare State pp.154-78.

76) Mellett, The Prerogative of Asylundom.

77) PRO/LCO11/1, Item B, March 1830 Macmichael reported.

78) Brougham MSS, 9384, Macmichael to Brougham, 25 Dec 1830; 6057, Metropolitan Lunacy Commissioners to Brougham, 22 Feb 1831.

79) Under 3 & 4 Will IV c.36, Macmichael and Southey were appointed in 1833. In 1837 Cornwallis Hewett succeeded Macmichael, and in 1841 John Bright replaced Hewett. The legal appointee to the Board was William Phillimore.

80) Another link was provided by F Barlow, see App D. In 1842 two Masters in Chancery were added to the Chancery Board, one of whom was Barlow, who was also a member of the Metropolitan Lunacy Commission from 1841-45. The other Master in Chancery was Edward Winslow, the brother of Forbes Benignus Winslow, the madhouse owner.

81) In fact, as Lord Chancellor, Brougham appointed four lay Commissioners of Whig persuasion, who had legal backgrounds: R Vernon Smith, J E Dowdeswell, E S Halswell and Sir G Grey.

82) Brougham was instrumental in the passing of Lunacy acts in 1831, 1832 and 1833 and was consulted on later Lunacy legislation. He also remained interested in lunacy reform through the Society for Promoting Amendment of the Law, which took up the subject. He himself consulted closely with Bentham, and shared the latter's belief that the civil law should be made into an edifice of statute law, so as to extricate it from the tangle of common or judge-made law. Moving the Lunacy Commission to the Lord Chancellor's jurisdiction was the first move in an attempt to rationalise the lunacy jurisdictions under one authority.

83) For evidence re. Peel and G Somerset's views see, Heywood, On the Want of Remedial Treatment for the Poor of Unsound Mind pp.20-21 and 61.

84) 2 & 3 Will IV, c.107, ss.vii and ix, the professional Commissioners could be the only five at the quarterly licensing meetings, and were empowered to grant licences; xx seven professionals could apply to the Consolidated Fund for money to defray expenses; xxiii five could grant the continuation of a licence; xxxv three professionals could do visitations; xli three professionals could discharge those detained improperly: On their own the professionals could not a) recommend the revocation of a licence b) alter the periodical visits of a doctor to an asylum.

85) Brougham MSS, 44155, Mylne to Le Marchant (Brougham's secretary), 2 Nov 1832; 44155, Shaftesbury to Mylne, 1 Aug 1833; 43992, G Somerset to Shaftesbury, n.d. 1833; 32665, Procter to Le Marchant, 13 Aug 1833; Earlier in the summer, Shaftesbury's reluctance to get involved in discussions about money, a continuing problem for his subordinates, is illustrated by a letter from Dubois to Brougham, 45376, 26 Jun 1833, Shaftesbury wanted Mylne or Brougham to pave the way for this salaries issue with the Chancellor of the Exchequer or Law Officers.

86) Brougham MSS, 33670, Shaftesbury to Brougham, 18 Jul 1845; Mylne had been responsible for drafting the Tithe Bill in 1833, 9883, Mylne to Le Marchant, May 1833.

87) See Matriculation Roll Glasgow University, for Mylne's paternal grandfather, James Mylne of Perth, Professor of Ethics, p.183, mentioned; his maternal uncle John Millar of Millaugh, Professor of Mathematics, p.111, Entry no.3536; his maternal grandfather, John Millar, Professor of Law, p.39, Entry no.1302; his father James Mylne, of Perth, Profesor of Moral Philosophy, p.183, Entry no.5823.

88) In addition Mylne was a contemporary of Riccardo, and the future Lunacy Commissioner, R W S Lutwidge, whilst at Lincolns Inn. He also counted the attorney general and future Lord Chancellor, John Campbell, among his friends, Brougham MSS, 43992, 1 Aug 1833.

89) CO54/186, Mylne to R Smith M.P. at the Colonial Office.

90) See Footnote 93 in chapter 1.

91) Halswell, Vernon Smith, Colonel Sykes, Baring, Reverend Campbell, Grey, Lennard, E A Seymour, E Clive and Shaftesbury.

92) Sykes, Statistics of the Metropolitan Commission in Lunacy; Hawkins, Elements of Medical Statistics; The third one who had sat on the Council was Halswell.

93) See also the paper in 1841 by William Farr, another member of the Council, 'On the Mortality of Lunatics,' in the Statistical Journal 1841.

94) Southwood Smith besides being a close colleague of Shaftesbury's was well known to Procter, and to John Forster who was appointed secretary to the Lunacy Commission in 1856.

95) Bisset Hawkins was one of the Lunacy Commissioners who had served on the council of the London Statistical Society. For further information see Cullen, The Statistical Movement in Early Victorian Britain.

96) Another contemporary of Lutwidge's at Cambridge and Lincoln's Inn was John Elliot Drinkwater (J E D Bethune) (1801-1857) Westminster and Trinity College Cambridge, BA 1820. MT 1821. Prominent in Whig/Liberal circles he was very involved in the Society for the Diffusion of Useful Knowledge and also on the Council of the London Statistical Society. A protege of Brougham's, he became legal counsel to the Home Office in 1833 and drafted many Whig reforms (including establishment of the Census in 1841). Like Bisset Hawkins he was an Assistant Commissioner for the Factory Commission, and also a Municipal Corporation Commissioner; The Benthamite Charles Austin was another contemporary at Cambridge and in Chambers.

97) The National Society for Promoting Religious Education, Church House, Dean's Yard, Westminster, Archives, Minute Book of the General Committee, Vol 4, Jan 1838 - Jul 1847, entry for 12 May 1838, Lutwidge served on the Committee of Inquiry and Correspondence with Lord Sandon (the future Earl of Harrowby, who was involved with Shaftesbury and Chadwick in the Health of Towns Association), W G Gladstone, Shaftesbury, H H Milman (Lutwidge was a friend and neighbour of Milman's nephew who was a barrister, see Cohen, The Letters of Lewis Carroll Vol 1, p.189) and W R Farquhar (a Metropolitan Lunacy Commissioner, see footnote 110); Lutwidge was also on a deputation to the Archbishop of Canterbury, see 4th AR of the Committee of Inquiry; He also had experience of fund raising and organising public meetings throughout the country, as secretary of the Subscription Committee, a sub-Committee of the Finance Committee. In this position he argued for paid agents to raise funds, rather than relying on gentlemen on the Committee, see Archives, N.S., Finance Committee, No.1, 9 Jun 1839 - 3 Mar 1846, entries dated, 16 Jul 1841 98). A testimonial in Jun 1842 praised Lutwidge's great zeal and ability on this sub-Committee.

98) Like many churchmen, Lutwidge feared the Established Church would lose its authority and allow education to be secularised. In 1838 he was writing to Lord John Russell on the subject. Russell Correspondence, PRO/30/22, 1 Aug 1838; Three years earlier he was approaching Peel about enforcement of subscription to the Articles of the Established Church at Durham University, Peel MSS, 40419, f.35, 2 Mar 1835.

99) University College London, Chadwick Correspondence, Chadwick to Shaftesbury, 9 Dec 1851.

100) See chapter 3 for details of the much more direct contact John Forster had with Bentham's ideas through his contact with Chadwick.

101) It is also likely that Vernon Smith, the nephew of Sydney Smith, had some contact with Benthamites through his uncle and also through his parliamentary activities as a Whig. (Sydney Smith was a friend of the Monros, see Monro Diaries, 27 Mar 1811, 17 Jan 1825, 25 Jan 1825)

102) See PRO/HO44/32, Lord Shaftesbury and the Commissioners to the Home Office, 20 Mar 1839, including a memo by Commissioners Halswell and Jelf Sharp, 15 Feb 1839 on Chelsea Workhouse for females, and a letter from Jelf Sharp to Shaftesbury, 2 Mar 1839; For the Poor Law Commission's replies to the Lunacy Commission's criticisms, see MH/19/63, 3490, HO to PLC, 22 Mar 1839, also 3490 for notes for a reply to Russell; See also HO/43/57, pp.151 and 255.

103) Shaftesbury was present when the the Report and Bills were finalised, but most of the writing was done by the legal commissioners, Brougham MSS, 17962 and 17963, both dated 22 Jul 1845, Procter to Brougham.

104) The Commissioners also talked about rationalising the expense of asylums especially as they were to be erected, 'for persons who, when in health, are accustomed to dwell in cottages.' Report of the Metropolitan Lunacy Commission to the Lord Chancellor 1844. pp.23-25.

105) The plans to incorporate a minimal use of workhouses and licensed houses for the pauper insane, until the county asylum system expanded, was a huge flaw in this Report, as the latter was never able to provide fully for pauper patients, and the former therefore continued in use.

106) Brougham MSS, Dubois to Brougham, 591, 6 Feb 1845 and 580, 16 Sep 1845.

107) For a detailed account of Prichard see, Leigh, The Historical Development of British Psychiatry Vol 1, chapter 3. H H Southey was one of the Statute named doctors but decided not to take up the post at the last minute, accepting a full-time post as the Lord Chancellor's Medical Visitor in Lunacy.

108) Shaftesbury Diaries, SHA/PD/6, 5 Nov 1850 and SHA/PD/4, 9 Aug 1845.

109) Brown, Fathers of the Victorians Brown's huge lists of those subscribing to evangelical societies are interesting, but tend to beg a lot of questions as to what exactly were the links between these men. In some respects they pose similar problems to those involved in tracing the influence of Benthamism; Also Bradley, The Call to Seriousness passim.

110) W R Farquhar had been a contemporary of Forster's at University College London, see Bellot, University College London 1826-1926. Ten Metropolitan Lunacy Commissioners subscribed annually to the National Society, and also the future Lunacy Commissioner, Robert Nairne.

111) See footnote 124.

112) For the appointment of Nairne see chapter 3. In 1856 other governors at the hospital included Lord Cranworth, the Lord Chancellor who appointed Nairne, and two other former Metropolitan Lunacy Commissioners, Lennard and Grey.

113) Peel MSS, 40558, f.450, 31 Jan 1835, Perceval to Peel.

114) Kingsley, Alton Locke pp.8-12.

115) The Record, 9 May 1849.

116) PP 1841, Sess 2, VI, Annual Reports, 1 Jun 1836 - 31 May 1837, p.4; 1 Jun 1837 - 31 May 1838, p.6; 1 Jun 1840 - 31 May 1841, p.4. In this last Report the Commission again repeat they are keeping recovered alcoholics in, because from their experience they know, 'that a permanent cure of the vicious habit....is extremely rare.' For further evidence of Shaftesbury's preoccupation with this see, Royal College of Psychiatrists, Minute Book of the Medico Psychological Association June 1841 - October 1892, p.18, for Shaftesbury's request to William Hitch, Superintendent of Gloucester Asylum, that statistics on alcoholism be collected.

117) In addition to Shaftesbury, Wynn, Prichard and Procter, there was also Southey's brother, Henry Herbert, and his nephew Reginald, who became a Lunacy Commissioner in 1883. (Reginald was a friend of Lutwidge's nephew Lewis Carroll, see British Museum, Carroll's Private Journals, Journal No.4, 1 Jan 1856 - 31 Dec 1856, entry for 18 Jan 1856). Later commissioners such as John Forster undoubtedly had an enormous admiration for Southey. See, Davies, John Forster: A Literary Life pp.101-2, 249. Forster though was anxious to separate the mature Southey from his youthful republicanism, and the same process occurred with Coleridge. Procter's step father Basil Montagu was also friendly with Southey and the lake poets.

118) The New York Public Library, Astor, Lennox and Tilden Foundations, H H and A A Berg Collection, 10 Apr 1831; In Jan 1832 Southey wrote similarly that the state of the poor could not be discussed too much, for until it was, 'improved physically and morally and religiously we shall be in more danger from them than the West Indian planters are from their slaves,' *ibid*, n.d.

119) Scull, Museums of Madness for the elements of social control inherent in the county asylum system.

120) Victoria and Albert Museum, Forster MSS, Procter to Forster, 1 Nov 1858; Supplement to the LC 8th AR, 31 Mar 1858, this was a scathing attack on the Poor Law authorities concerning the use of workhouses for the care of lunatics.

121) Forster, Lennard and Wynn were also opposed to slavery. Rose wanted to convert the slaves to Christianity.

122) See chapter 3.

123) Procter and Forster, like Dickens, were acquaintances of John Elliotson the mesmerist, consulted him about their own health and attended seances. It may well have been due to their influence that Elliotson was called in as a professional witness in the Snape case, see chapter 6, footnote 80.

124) Most of Prichard's work in the fields of philology and ethnology was directed towards justifying biblical accounts of the origins of man. He hoped to illustrate by comparative philology a common origin of language, and in ethnology theorised that man had developed from one original source in Africa. In the religious field

he represented primitive and non-Christian religions as corruptions of the original divine revelation.

125) Forster MSS, 48 E 32, Letters from Procter to Forster, 26 Oct 1859, Gaskell in the Netherlands; 7 Feb 1865, Wilkes in Belgium; 17 Sep 1867, Lutwidge in the Pyrenees; 28 Sep 1864, Gaskell in Switzerland.

126) See Appendix C.

127) Garret Dillon was among the other applicants for this post, Brougham MSS, 44208, 14 Dec 1832, Dillon to Brougham; Browne was found to have appropriated funds after his death, PRO/T1/3935, 6 Feb 1833, Shaftesbury to J Stewart at the Treasury, and T1/3935, 29 Jan 1833, G Maule to J Stewart, concerning the debt of £441.

128) Brougham MSS, 43081, n.d. 1832, Dubois to Brougham.

129) Brougham MSS, 579, 16 Jun 1845; 572, n.d. 1845; 581, 26 Jul 1845; 580, 16 Sep 1845. Shaftesbury clearly wanted to replace Dubois with Lutwidge, but was again embarrassed by the financial bargaining Dubois was intent on. There is evidence that he attempted to buy Dubois off altogether in August 1845, with the offer of a clerkship in Customs for his son. This was rejected because of its 'vile' associations, and a post in the foreign office was offered. (Lutwidge was the son of a Customs officer) Dubois was wrong in thinking that the Commissioners were against him, as Procter asked Brougham to intervene and obtain some recompense for him. He remained attached to the Commission after 1845, and was used to monitor proceedings in Parliament.

130) At this time Mylne was a reporter in Chancery, and in the process of preparing a book; Southey, Bright and Hewett all worked as Lord Chancellor's Visitors during this period; Shaftesbury was involved with the Ten Hours Bill, the Sunday Observance Laws, Church Pastoral Aid Society and the establishment of a protestant bishopric in Jerusalem; Turner was secretary to the College of Physicians; Procter had a conveyancing practice and was involved in literary life in the Blessington D'Orsay salon, and with Dickens, Browning and Talfourd in the Green Room at Drury Lane; Sykes was busy with the London Statistical Society and in 1840 became a Director of the East India Company; Gordon was secretary to the Board of Control and Treasury.

131) PP 1841 Sess 2, VI, Reports for 1837/8, 1838/9 and 1840/1 all mention inadequate office space. Some moves were made to obtain larger offices, but this came to nothing, HO/43/57, p.461, 21 Aug 1839, HO to Dubois asking him to call at the Office of Woods concerning rooms for the Commission. The professional Commissioners role is also reflected in the names appended to the annual reports. Their names appear more often.

132) The Retreat, Kingsmith, Hammersmith. Also the licence for Holly House, Hoxton was not renewed.

133) CO7/77, HO to CC, 31 Mar 1843, 30 Mar 1843; CO7/73, HO to CO, 18 May 1842; 9 May 1842, LC to Sir J Graham; 16 Mar 1842, Mylne to Shaftesbury; 21 Mar 1842, Southey to Shaftesbury; 2 Apr 1842, Turner

to Shaftesbury; 26 Mar 1842 Hume to Shaftesbury; CO55/82, letters dated 22 May 1840, 10 Jun 1840; CO54/186, 2 Jun 1840, Mylne to CO. (See also HO43/6, 31 Mar 1843, HO request for advice about ways of combatting abuses in the Jamaican asylum.

134) Between 1835 and 1841 contact with the Home Office was minimal during the Secretaryships of Lord John Russell and Normanby. In part this was due to their preoccupation with Chartist and Anti-Poor Law agitation.

135) For the returns issue, HO43/61, pp.252-3, 2 letters dated 10 Dec 1841. For correspondence concerning Byas's house see HO43/61, p.494, HO to G Somerset, 8 Feb 1842; HO43/61, p.505, HO to Shaftesbury, 11 Feb 1842; HO43/62, p.76, MLC to HO, 8 Mar 1842; HO43/62, p.24, HO to Shaftesbury, 21 Feb 1842. As Shaftesbury was Chairman of the Commission, Graham's action in approaching Somerset first was discourteous. At this time Shaftesbury's relations with Peel and Graham had been soured by disagreements over factory legislation, which may have spilled over into this sphere. Shaftesbury was disappointed by Peel's offer of office in the Queen's household in the new government, which he felt was an attempt by Peel and Graham to undermine his position in the Factory Movement.

136) The idea for this may well have come from Sir A Halliday, who wrote to Chadwick in 1836 and 1837 suggesting such a scheme and requesting an interview with the Poor Law Commissioners, Chadwick MSS, 921, Halliday to E Chadwick, 25 Jun 1836 and 6 Jan 1837. In 1840 at Chadwick's prompting the Poor Law Commissioners attempted to persuade Normanby to allow Unions to provide asylums for their own poor.

137) For Halliday see footnote 136; Heywood, On the Want of Remedial Treatment passim; Millingen, Aphorisms on the Treatment and Management of the Insane pp. 179-99. His book was dedicated to the Commissioner J R Hume; Browne, What Asylums Were, Are, and Ought to be passim; Costello, A Letter to Lord Ashley on the Reform of Private Licensed Asylums pp.13-15; Crowther, Observations on the Management of Madhouses pp.8-12, 83-85; Newell, A Warning Voice from the People to the Queen p.8 for Dillon's remarks.

138) HO43/64, William Kirtley to HO, 17 Oct 1844.

139) Griggs, Lunacy versus Liberty; Mackenrot, A Letter to Sir Robert Peel.

140) Griggs, Op.Cit. p.6.

141) Thomas Wakley (1795-1862) MRCS 1823. Founded the Lancet in 1823. MP Finsbury 1823-62. Middlesex Coroner 1839-62. Wakley had a particular interest in lunacy, partly owing to the illness of his nephew Mr Townshend, who had been confined at Southall Park Asylum, Morison Diaries, 24 Apr 1849. See also Sherrington, Thomas Wakley and Reform 1823-62 Oxford D.Phil 1972.

142) For further details see Hervey, 'Advocacy or Folly: The Alleged Lunatics' Friend Society 1845-63' in Medical History (1986) xxx, pp.245-73. Wakley's support was a mixed blessing as he was also

intent on pursuing medical interests, and ignored the Society's views if these clashed with medical prerogatives. In 1842 he tried to get the age of Commissioners on appointment, lowered.

143) Shaftesbury Estates, Private Correspondence of the Seventh Earl, letter dated 24 Oct 1841, Graham to Shaftesbury.

144) HO45/OS/94, 7 Dec 1841, Dubois to the Hon Manners Sutton, HO Under-Secretary.

145) The Commissioner J R Hume had inspected the latter in his role as Inspector General of Hospitals (an army appointment) and must therefore have had some idea of the conditions prevailing there. He almost certainly inspected Fort Pitt Chatham whilst J G Millingen was superintendent there.

146) Wakley and G Somerset had a battle over these appointments, the former wanting medical men and the latter lawyers. Wakley won a division in the House, leaving the appointments to the Lord Chancellor, but in the end, two of each were appointed.

147) 5 & 6 Vict c.87, s.XLII. This was important as there were very real fears that the professional Commissioners would abuse these payments as an extra source of income. See Brougham MSS, 591, 6 Feb 1845, Dubois to Brougham. Dubois claimed that the legal Commissioners had concocted the 1842 Act, so that they effectively visited twice as much as the medical Commissioners, which was true as there were 7 doctors on the Commission to only four lawyers. See also 579, 16 Jun 1845 Dubois referred to the 1832 Act, and said that a layman had always visited with a professional commissioner which acted as a check, 'but now there will be no control - the paid [members of the Commission] go alone or go not - or when they please and perform the duty perfunctorily or not as they chuse - the salary being fixed.' See 580, 16 Sep 1845, for abuses by the Commissioners after the Act.

148) 5 & 6 Vict c.87, ss.XIV, XXI, XXIII, XXV, XXVI, XXVIII and XLV.

149) Peel MSS, 34624, Procter to MacVey Napier, 13 Jul 1844.

150) Farr, On the Mortality of Lunatics pp.32-33. The safeguards surrounding Chancery patients were largely illusory. See Hervey, Advocacy or Folly pp.265-67. Also chapter 5 below.

151) Metropolitan Commissioners in Lunacy, Report to the Lord Chancellor, p.20.

152) The evidence suggests that Sykes was placed under pressure by his colleagues not to reveal the name of madhouse owners when he published his paper, and the Statistical Society were subsequently refused permission to obtain tabular statements from the Commission's Registers of their statistical returns, 5th AR of the Statistical Society, p.58.

153) See chapter 4.

154) Hansard 3S Vol LXV, 16 Jul 1842.

155) Shaftesbury was attacked by the Times for allowing Graham to postpone legislation for a year, but in reality he brought the subject up too late in the Session for careful drafting of new legislation.

156) Peel MSS, 34624, Procter to MacVey Napier; The Quarterly Review Oct-Dec 1844; The Westminster Review Vol 43, Mar-Jun 1845, pp.162-92; The North British Review Vol 3, May-Aug 1845, pp.387-405.

157) HL Journal 1846, p.319 Eastbourne Union; p.325 Parish of Brampton Abbots, Ross, Herefordshire and the Ross Guardians; p.391 E Grinstead Sussex; p.606 Droitwich Guardians etc. See also HC Journal 1845 and 1846.

158) Medical Times Vol 14, No.347, p.164, 23 May 1845; Also p.164 for the Monmouth Guardians' petition concerning the idiocy clause.

159) Brougham MSS, 17962, Procter to Brougham, 22 Jul 1845. Procter framed all of the Care and Treatment Act except the composition of the Commission. Lord Warneford lent his support in the Lords.

160) Bethlem still remained exempt from this act.

CHAPTER 3 FOOTNOTES

- 1) Hodder, The Life and Work of the Seventh Earl of Shaftesbury passim; Hammonds, Lord Shaftesbury, pp.187-215; Best, Shaftesbury, chapter 2; Battiscombe, Shaftesbury: A Biography of the Seventh Earl, pp.205-26; Finlayson, The Seventh Earl of Shaftesbury pp.34-37, 228-32 and 552-54. The Hammonds were the only biographers to give some thought to Shaftesbury's actual role as chairman, beyond looking at his giving evidence before the various Select Committees.
- 2) Hansard 3rd S, vol. 76, pp.1257-64; also PP 1859 1st Sess. III, pp.64-5 and PP 1877 XIII, pp.520-35.
- 3) PP 1859 1st Sess. III, p.64.
- 4) Hansard 3rd S, vol 61, p.806; PP 1859 1st Sess. III, p.23; JHL, 24 Mar 1862; In contrast to these views about doctors where lunacy was concerned, Shaftesbury was very concerned to obtain the appointment of a medical officer to the Poor Law Commission. In 1844 he was Chairman of the Select Committee on Poor Law Medical Relief, and proposed this, but was opposed by Chadwick.
- 5) Newington, 'Some incidents in the History and Practice of Ticehurst Asylum' in J.M.Sc. 1901, Vol 47, pp.70-1.
- 6) PP 1859 1st Sess. III, pp.7-10; Lancet 1859, Vol 1, pp.592-3.
- 7) Gaskell, North and South, p.376; Clearly the concept of confined housing as a cause of insanity was a generally posited theory and one held by Chadwick for instance. Chadwick MSS, 531, John Conolly to Chadwick, 12 Dec 1842, 'The difficulty of replying satisfactorily has long delayed my reply to your enquiry as to the effect of dark and ill lighted abodes on the number of cases of insanity.'
- 8) SHA/PD/3, 18 Nov 1844. This was written after a six hour inspection of Peckham House where he commented on the facility with which patients were incarcerated, and the difficulty of getting them out.
- 9) SHA/PD/2, 3 Oct 1838; SHA/PD/5, 4 Nov 1847.
- 10) SHA/PD/7, 30 Jul 1859.
- 11) The Earl Of Ilchester, The Journal of the Honorable H E Fox 1818-1830 p.131. Henry Edward Fox (1802-59) 4th Baron Holland, MP 1826-27. In the diplomatic service in Italy. An Oxford contemporary of Shaftesbury's. In 1820 he wrote, 'Ashley's character seems to me quite unintelligible and can only be accounted for by a dash of madness.' Mabel Countess of Airlie, Lady Palmerston and her Times Vol I, pp.146-8, Frederick Lamb, the uncle of Shaftesbury's future wife Emily Cowper, was less than enthusiastic about him, and asked his sister Lady Cowper what her daughter had done, 'to deserve to be linked to such a fate, and in a family generally disliked, reputed mad, and of feelings, opinions, convictions directly the reverse of all ours.'
- 12) Woodham Smith, Florence Nightingale 1820-1910 p.589.

13) Shaftesbury's ear complaint has all the hall marks of Meniere's syndrome which is characterised by ringing sounds, vertigo, and deafness. It generally improves in time, as indeed did Shaftesbury's complaint. Battiscombe's hints of a manic-depressive illness are well off beam, suggesting little acquaintance with the illness, which has many features other than mood swings.

14) In 1848 Shaftesbury attended the Harveian Oration at the College of Physicians but decided not to return for the evening dinner for fear he would be asked to make a speech, and in 1852 he recorded nearly breaking down when giving a speech at the Lancet testimonial to John Conolly, see SHA/PD/5, 24 Jun 1848 and SHA/PD/6, 1 Apr 1852.

15) Times 25 Jul 1844.

16) St Giles House, Wimborne, Dorset, Shaftesbury MSS, Shaftesbury to Sir Trevor Lawrence, 10 Jul 1877 and 13 Jul 1877; Shaftesbury to Mr Case, 27 Jun 1877; Shaftesbury to Mr Herschel, 22 Jun 1877; See also PRO/MH51/721, Shaftesbury to C Perceval (Secretary to the LC) 8 Dec 1875. This letter shows how Shaftesbury decided not to oppose Mortimer Granville's Lancet Inquiry into Metropolitan asylums, but to let proprietors take the responsibility for whether to admit the Lancet's representatives or not.

17) For example see, PRO/MH51/49, Broadmoor Asylum File, final report of the sub-committee, 7 Aug 1861, and the Lunacy Commission to Colonel Jebb, 9 May 1862.

18) For Shaftesbury's commitment see, MH50/10, 2 Nov 1859, Minutes of the Board's meetings were sent to him at his home in Dorset; For colleagues support see PRO/LCO/I/66, File on the Lunatic Asylums Amendment Bill 1885, Letter from James Wilkes to Lord Chancellor Selbourne, 11 Jun 1885, in which Wilkes states the immense advantages the Commission derived from Shaftesbury's experience and judgment. He stressed that the latter was unaware of his approach.

19) PP 1860 XXII, pp.22-24.

20) The first occasion on which a professional Commissioner chaired a Board was when Procter did so on 27 Aug 1846. Later it gradually became more common, but most meetings were chaired by a lay Commissioner.

21) HO45/2726, 22 Jan 1852 report by Shaftesbury and Gordon; Also PRO/HO45/5490, correspondence in 1854. See both files for discussion of the case.

22) Visiting: Forster MSS, 48 E 32, Procter to Forster, 13 Sep 1860. Procter was ill, but told Forster that Wilkes and Lutwidge were doing his western circuit, adding, 'I tell you all this as it lessens the urgency of Lord S[haftesbury] acting on my behalf.' Also Bethlem Archives, Visitors Book, Jun 1855; Legislation: see MH50/5, 21 Apr 1852 and MH50/10, 3 Feb 1859 for Shaftesbury's involvement; MH19/169, Shaftesbury was on a deputation to the Poor Law Board 14 Feb 1860. He also headed the Bethlem Inquiry in 1852.

23) MH50/1, 8 Oct 1846 for his suggestion of minimum qualifications for licensees; MH50/10, 1 Dec 1858, for a proposal that the board look at workhouse visitation.

24) Finlayson, The Seventh Earl of Shaftesbury p.563; Lytton MSS, D/EK/C14, 9 Oct 1858, Forster tells Lytton he is going to stay with Shaftesbury for ten days; also 4 Nov 1858; Brougham MSS, 24538, 7 Nov 1859 Forster to Brougham whilst staying at Cranborne; For Garibaldi and Southwood Smith see Davies, Forster: A Literary Life pp.97 and 117, and Finlayson, The Seventh Earl pp.457-8.

25) Forster MSS, 48 E 32, Procter to Forster, 26 Jul 1861 and 28 Jul 1861. It was during his correspondence with Forster that Procter learned that his wife had approached Lord Shaftesbury about the matter. (All the correspondence quoted in the Forster MSS is from Procter to Forster, and subsequent references will merely say P to F).

26) MH50/1, 8 Oct 1846, John Nash who prevaricated was severely reproved and cautioned by Shaftesbury; MH50/4, 26 Apr 1849, an asylum proprietor's solicitor was, 'desired to quit the room;' SHA/PD/5, 16 Mar 1849, Shaftesbury wrote, 'got somewhat excited, and lost, not my temper, but my judgment, and ordered a witness out of the room when I ought merely to have rebuked him.'

27) 8 & 9 Vict c.100, s.VIII, 'in all cases every question shall be decided by a majority of voters (the Chairman whether permanent or temporary, having a vote) and in the event of an equality of votes the chairman for the time being shall have an additional vote.': See MH50/3, 15 Aug 1848, no decision was taken about the renewal of a licence until Shaftesbury's return.

28) Shaftesbury was for instance President of the Medical Benevolent College, and among his Vice Presidents were A J Sutherland (Blacklands House), George Stilwell (Church Street Epsom), William Wood (Kensington House) and William Withey Gull (Guy's Lunatic Ward). F Bisset Hawkins and E J Seymour were also Vice Presidents.

29) Single Patients: In law, it was illegal after 1828 to care for single patients, unless they came under a Chancery Committee or the task was undertaken without profit, until an order and two medical certificates were obtained. These patients were generally cared for in lodgings.

30) PP 1859 Ist Sess, III, pp.59-60. In 1845 Shaftesbury only raised £1,200 after an appeal, and had to return the money to subscribers two years later. In 1861 he spoke at a public meeting in Freemasons Hall in favour of a similar scheme. At this meeting £760 was raised, but once again the project floundered.

31) SHA/PD/5, May 1848, 9 Apr 1849, 23 Jul 1849, 24 Nov.1850, 31 Jan 1851 and 5 Jul 1851.

32) SHA/PD/6, 5 Sep 1851; When asked about single lodgings in 1859 Shaftesbury claimed that it was in many instances the worst system. He stated from the bottom of his heart that he, 'would advise anybody, if it should please Providence to afflict any member of his family, to send him or her to a private asylum.' There was a hint of

dishonesty in his next reply though which stated that if his own wife or daughter were afflicted and couldn't stay at home, he would send her to a private asylum, PP 1859 1st Sess, III, pp.30-32.

33) Parry Jones, The Trade in Lunacy pp.88-89. Parry Jones stated that there was no provision for inquiry into the character of applicants and quoted Conolly from A Remonstrance with the Chief Baron p.34 who claimed that the previous occupation and education of Proprietors was immaterial to the success of their application; It was not until 1862 that the first statutory provisions were made for a house to be inspected before it was licensed, but this was done by the Commissioners from 1846 onwards, MH50/1, 14 Jan 1846.

34) Shaftesbury MSS, M/s notes on the proceedings of the 1859 Select Committee on Lunatics.

35) Shaftesbury was enthusiastically in favour of laymen assisting the church in its parochial ministry. Many members of the Church Pastoral Aid Society fulfilled this function.

36) MH50/1, 14 Mar 1846. It was agreed that if a Commissioner felt it desirable to visit on a Sunday, he should do so and report the special reasons why, to the Board.

37) SHA/PD/6, 19 Sep 1851.

38) There is some truth in his statement where the Metropolitan Lunacy Commissioners' Secretary Dubois was concerned. Dubois was retained by the Commission until his death in January 1850, at a salary of £270 p.a. He was used to scan parliamentary votes for matters connected with lunacy.

39) His uncle was Admiral Skeffington Lutwidge; his brother, Charles Henry Lutwidge 1800-43, Educ St Johns Cambridge BA 1823, MA 1832. Deacon Ely, Priest Chester, Vicar of Ottery in Somerset, Canon of St Pauls Huddersfield 1831-3, Vicar Burton Agnes Yorks 1833-39, Rector E Farleigh Kent 1840-43; his nephew C R F Lutwidge was a barrister and became Mayor of T Wells Kent; See Cohen, The Letters of Lewis Carroll Vol 1, pp.10, 14, 17, 19-22, 91, 170 and 189. Vol 2, pp.1043-4; British Museum Add MSS, Lewis Carroll's Private Journals, 54340-54348; Lutwidge's sister Henrietta wrote evangelical pamphlets for children; See also Lutwidge, C H, The Church of England can take no middle stand between Protestant Truth and Papal Error and Strictures upon a Sermon entitled the Necessity of Philosophy to the Divine by John Matthews.

40) Medical Circular and General Medical Advertiser Vol 9, 1856, Report dated 20 Aug 1856 on a meeting of the A.M.O.A.H.I. at which Winslow stated he had known Lutwidge well, for several years before the Lunacy Commission came into existence. Lutwidge was also a friend of H H Milman, and had met Spencer Walpole (a future Home Secretary) and Henry Goulburn at the National Society. He was also Auditor of the Society from 1839-56.

41) Cohen, Letters of Lewis Carroll Vol 1, p.10. Lutwidge possessed a lathe, telescope stand and telescope, a crest stamp, refrigerator and microscope. He was a pioneer photographer helping his nephew to take this up, and encouraging his friendship with young Reginald

Southey (a later Lunacy Commissioner), Carroll Journals, Vol 4, 1 Jan 1856 - 31 Dec 1856, entry for 18 Jan 1856, when Southey and Carroll went over to Dr Diamond at Surrey County Asylum. Diamond gave them a full length portrait of R W S Lutwidge; Cohen, Op. Cit. Vol 1, p.14, Lutwidge also had a little pocket instrument for measuring the distances on a map, which would have been useful for working out the Commissioners' visitation circuits.

42) MH50/4, 9 Jan 1851, Lutwidge went to court in the Donelley case where an attendant, Samuel Hill, had killed a patient at Peckham House; MH50/4, 28 Jun 1848 Lutwidge examined in the Nottidge case as a witness for Miss Nottidge, see footnote; MH50/1, 19 Nov and 26 Nov 1846 Lutwidge to the Bail Court in the case of Mrs Rhodes a patient who was illegally detained for financial reasons by a Dr Quail; MH50/4, 23 Aug 1849 Lutwidge to the Central Criminal Court concerning Mr Freeman who was detaining single patients illegally without certificates.

43) LC 5th AR, 1850, pp.11-12. Also MH50/4, 20 Dec 1849.

44) For patients' relatives see MH50/7, 12 Sep 1854 and 21 Apr 1855; for legal and medical representatives MH50/7, 4 Jan 1855; for Guy's MH50/6, 28 Apr 1853; for Bethlem MH50/5, 2 Aug 1851; Lutwidge also met the Surrey Coroner, MH50/6, 9 Nov 1853.

45) MH50/5, 4 Aug 1852.

46) MH50/1, 23 Jul 1846, Lutwidge met with S M Phillips after which it was decided that the Lunacy Commission and not the Home Office would be the best organisation to inform Derby Asylum that approval for its plans had been withheld; See also MH50/6, 6 Oct 1852 Lutwidge met Waddington concerning the Bethlem Report.

47) MH50/4/ 26 Jul 1849. Pollock was a friend of John Forster, Lutwidge's successor as secretary. See Davies, John Forster: A Literary Life p.107.

48) MH50/1, 1 Oct 1845. Lutwidge also proposed a miscellaneous book for recording documents on this day; MH50/2, 11 Feb 1847.

49) MH50/5, 3 Dec 1851. This system of using a board evidently did not work, because in 1854 it was decided that matters referred to individual Commissioners be put on a list which was to be brought before the Board from time to time, MH50/7, 30 Mar 1854.

50) Forster MSS, 48 E 32, P to F, 28 Dec 1855; P to F, 17 Aug 1856.

51) Forster MSS, 48 E 32, P to F, 16 Oct 1856; P to F, 11 Apr 1862.

52) PRO/HO43/71, entries for 15th and 19th Jun 1846; MH50/3, 5 Jul 1848; MH50/7, 7 Feb 1855.

53) MH50/7, 2 Jun 1854; MH50/4, 24 Jan 1850.

54) Forster MSS, 48 E 32, P to F, 30 Sep 1857, whilst standing in for Forster Procter wrote, 'The last Board was a very heavy one - nearly 50 items - and involving almost 20 letters I think. All the

letters are goneand the minutes (a work of some hours to me inexperienced) done also.'

55) At this time the Poor Law Board had a Parliamentary Secretary and three on £1,200, £1,000 and £900. The Local Government Act Office Secretary got £1,000, whilst those at the Ecclesiastical Commission and Public Works and Loan got £1,000. At the Privy Council for Education the Secretary had £1,500 with two assistants on £1,000 and at the Science and Arts Department the post fetched £1,200.

56) PRO/HO45/OS/7388, Memorandum from Shaftesbury to the Home Secretary, Sir G Grey; Also PRO/T/1/6361/9955, Treasury to HO, 13 Jun 1862. Wright, Treasury Control of the Civil Service 1854-74 has made the point that Trevelyan usually rejected requests for increases, because the department concerned failed to prove to his satisfaction that the work had materially increased. The only way round this was persistent entreaty.

57) Although the J.M.Sc. No.16, Jan 1856, suggested that this promotion had been envisaged by the legislature, there is no such evidence in the Acts. Forster's letters to Brougham show that the precedent was established at this time, Brougham MSS, 31876, 8 Dec 1855 and 31877, 27 Dec 1855; Also PRO, Correspondence of Lord John Russell, 13A, f.124, LJR to Forster 13 Jan 1856.

58) Brougham MSS, 24393, 15 Oct 1855; Russell MSS, 13A, f.124; Lytton MSS, D/EK/C27, Nov 1855, Lytton to Forster, concerning Cranworth, 'It seems to me that your chances of what is so nobly due to you by the party should not be left to a Chancellor who is rarely a party chief under party observation - and much more under personal feelings for disposition of patronage. Another time let the appeal be made direct to Palmerston - He would not, and I think would not wish, to slumber on such a matter.' Forster had already tried to get posts as a Charity Commissioner, Poor Law inspector and as Editor and Publisher of the London Gazette in the previous year. With the Charity Commissioner's job he was in contention with Hayter's brother, who had the Treasury influence behind him. Brougham MSS, 1496, Whitwell Elwin to Brougham, 11 Sep 1855; 24525, Forster to Brougham, 24 Nov 1855.

59) Brougham MSS, Forster to Brougham, 22 Jan 1856.

60) Brougham MSS, E Conolly to Brougham, 11131, 27 Nov 1846 request for help with post at the Board of Trade or Railway Board; 35929, 20 Mar 1847, concerning a post at the Treasury; 760, 3 Feb 1851, Poor Law Inspector's job; 24694, 27 Dec 1853, about a post as a Charity Commissioner; 837, 6 Dec 1855 Secretary to the Lunacy Commission; 8897, 8 Aug 1857 Scottish Lunacy Commissioner's post.

61) William Spring Rice (1861-65), Charles Palmer Phillips (1865-72) and Frank Hardinge Gifford (1895-1900).

62) J.M.Sc. No.16, Jan 1856; Sir John Charles Bucknill (1817-97) MD London, FRCP, FRS, Superintendent Devon County Asylum 1844-62. Lord Chancellor's Visitor in Lunacy 1862. President A.M.O.A.H.I. 1860. Editor J.M.Sc. 1853-62.

- 63) Forster of course followed in Chadwick's footsteps here.
- 64) University College London, Correspondence of the Society for the Diffusion of Useful Knowledge, Forster to Coates, 23 Jan 1837.
- 65) Chadwick MSS, Chadwick to Shaftesbury, 9 Dec 1851.
- 66) Victoria and Albert Museum Library, Forster Pamphlet Collection, for Toulmin Smith and centralisation see, 298, Smith, Speech against Centralisation 1850; 380, Smith, Centralisation a Vicious System 1854; 335, Knight, The Parochial System versus Centralisation 1854; For patronage see, 439 and 508, Appointment and Promotion by Merit 1855 and n.d.; 434, Benthamiana or Administrative Reform 1855; 434, Cracroft, Administrative Reform competition and the abolition of Patronage 1855; 27 and 61, Austin, Architecture: abuses of competition 1841.
- 67) Davies, Forster: A Literary Life pp.114, 135 and 142; For Winslow see, Winslow, Recollections of Forty Years p.62.
- 68) Forster was widely satirised by his friends and enemies. Thackeray depicted him as 'Addison's man' in The Newcomes and Tom Boxer in Henry Esmond; Dickens as Dowler in Pickwick Papers; Rosina Lytton as Fuz-buz in Cheveley; Lytton as Hardman in Not So Bad As We Seem; and G H Lewes as Pungent of the Exterminator in Ranthorpe. The most famous of all though was Dickens characterisation as Podsnap in Our Mutual Friend. Podsnap quickly made himself at home with people becoming their 'oldest friend'. He was conceited, obstinate and possessive. Intolerant of others, he was dominant in his relations with them, imposing his own opinions. Like Forster, Podsnap was also in favour of the 'Constitution,' 'Magna Carta,' and the sturdy greatness of Englishmen. He was also dismissive of foreigners and their ways.
- 69) Macready found the same when his remarriage to a younger woman, following his wife's death, offended Forster's sense of propriety.
- 70) Morgan Library MSS, Dickens to Macready, 27 Dec 1868, quoted in Davies, Forster: A Literary Life p.276, footnote 71.
- 71) Brougham MSS, 31877, Forster to Brougham, 27 Dec 1855, 'Upon the whole and considering that the Commissionership would have compelled an immediate and violent severance from my present pursuits which to some extent will continue still compatible with the junior office, I prefer the secretaryship.' Lytton evidently had the same idea, see, Lytton MSS, D/EK/C27, EBL to Forster, 31 Dec 1855.
- 72) Forster MSS, 48 E 32, Carlyle to Forster, 10 Jul 1859. He suggested that Forster 'fling up' his office if it tired him out, because it, 'yields neither distinction nor real profit of any kind - nor does your pleasure lie, I think, in that direction.'
- 73) Forster also had pamphlets on medical reform and the regulation of medical practice, cholera, the use of chloroform, public sanitation, baths and washhouses, the suppression of brothels, the reform of Chancery, the effects of separate confinement, the Mark system in prison discipline, and the inspection of factories.

- 74) MH50/9, 5 Nov 1857.
- 75) MH50/9, 24 Apr 1857; MH50/10, 20 Jan 1859, 21 Jan 1859 and 3 Feb 1859.
- 76) Davies, Forster p.118.
- 77) 8 & 9 Vict c.100, s.XXXIII. They were also barred from signing certificates or professionally attending patients in these houses. The penalty for breaking the law was a £10 fine.
- 78) J.M.Sc. Vol 5, No.29, Apr 1859, p.380.
- 79) SHA/PD/4, 9 Aug 1845.
- 80) Morison Diaries, 6 May 1846; Turner also continued to act as Vice President of the *Society for the Relief of Widows and Orphans of Medical Men in London* where he rubbed shoulders with asylum proprietors such as Burrows and Sutherland.
- 81) Medical Circular and General Medical Advertiser Vol 9, 20 Aug 1856; Forster MSS, 48 E 32, P to F, 21 Jul 1863. Procter also spoke of his friendly relations with the Drs Mayo (Procter to Forster 20 Oct 1863).
- 82) The first of these was Gaskell in 1849, and the second Wilkes in 1856.
- 83) In 1845 the Commissioners unanimously rejected the government superannuation scheme preferring to receive more in their salary, MH50/1, 15 Oct 1845; See also PRO/T/27/142, 10 Oct 1845, Trevelyan to LC, agreeing to the wish not to be placed on the schedule of the Act 4 & 5 Wm IV c.24 concerning superannuation.
- 84) PRO/T/144, 30 Mar 1853.
- 85) MH50/8, 30 Nov 1855, for Turner's pension; Lytton MSS, D/EK/C23/16, Forster to Lytton, 4 Dec 1870. Forster reported suffering badly on circuit, saying, 'the joy has gone out of my life - but I struggle on just as I can....Unhappily I am not entitled to my pension until after another year's service or I'd resign tomorrow.'
- 86) Procter, Campbell, Wilkes and Forster. It is possible that Nairne was too, although it appears he may have given up his role as Honorary Commissioner as well shortly before his death.
- 87) See chapter 2, footnote 38 for Turner, also Appendix D; For correspondence with Monro see, Royal College of Physicians, 1024/19, 5 May 1846 Turner to Monro; 1024/19, 9 Nov 1852 Turner to Monro; 2011/4, 28 Nov 1849, Turner to Monro.
- 88) Perceval, Letters to Sir J Graham 1st letter dated June 1844.
- 89) J.M.Sc. Vol 2, No.16, Jan 1856.
- 90) J.M.Sc. Vol 1, No.6, Jul 1854, for criticism of Mylne and Hume's report praising N and E Riding Asylum where restraint was still in

use and employment was pushed beyond its legitimate use as a therapeutic remedy; Also J.M.Sc. Vol 4, No.26, Jul 1857, Report on the LC 11th AR; J.M.Sc. Vol 3, No.20, Bucknill expressed disappointment at the evidence Hume gave concerning the new army asylum, suggesting that he, 'failed in bearing distinct testimony to the very principle on which the Commission is based ie. moving the insane poor into public institutions.'

91) See Longford, Wellington: Pillar of State pp.83, 199-200. Despite Douro's great love for Elizabeth Hume their romance was blighted by Wellington's concern that his son should not marry beneath himself; Morison Diaries, 7 Aug 1840.

92) SHA/PD/6, 5 Nov 1850.

93) For a clear exposition of Hume's views see, PRO/CO7/73, Hume to Shaftesbury, 26 Mar 1842.

94) Lancet 6 Jan 1849, 13 Jan 1849 and 20 Jan 1849.

95) Prichard, On the Different Forms of Insanity, in relation to jurisprudence, designed for the use of persons concerned in legal questions regarding unsoundness of mind; For discussion of Prichard's influence in this field see, Smith, Trial by Medicine: Insanity and Responsibility in Victorian Trials pp.25, 38-62.

96) PP 1859 Ist Sess, III, p.23 for Shaftesbury's doubts.

97) Peel MSS, 40512, f.93, Prichard to Peel, 23 Jul 1842, trying to obtain a professorship of Modern History at Oxford. Bisset Hawkins also tried to get this post, 40510, Hawkins to Peel, 14 Jun 1842.

98) Morison Diaries, 5 Apr 1847 for the Ethnological Society; Tuke, Prichard and Symonds. Tuke quoted Professor Gibson of Philadelphia, who claimed that Prichard was uncommonly mild, open, benevolent, cheerful and sociable, with an artless, childlike simplicity, free from envy and professional rivalry. See also chapter 2, footnote 124 for Prichard's religious views.

99) As Bucknill pointed out, Gaskell's experience at Stockport was useful because there was a cholera epidemic soon after his appointment as a Commissioner, J.M.Sc. Vol 1, No.1, Nov 1853.

100) B.M.J. Vol 1, 1886, p.720.

101) PRO/MH50/1, 24 Sep 1845 and 15 Oct 1845; Royal College of Psychiatrists, Minute Book of the Medico Psychological Association (Successor to the A.M.O.A.H.I.) shows that he attended most of the early annual meetings, and in 1861 Procter noted that he had gone to a scientific meeting in Manchester.

102) Chambers Journal Vol 8, 1847, pp.169-70 and 262-5. Kindly brought to my attention by Mike Jones of UMIST.

103) B.M.J. Vol 1, 1886, p.720.

104) Forster MSS, 48 E 32, P to F, 15 May 1857, in an amusing letter written whilst on circuit Procter described Gaskell, 'writing at

another table, intent on some profound work - I see him knit his brows and look as if America were just discovered and I see, 'The Baths and Washhouses' are before him - or rather the Bath Question.' See also, 26 Oct 1858, 'I went to Brighton under the delusion of holiday making there - but my friend Samuel had me out visiting every day except two,' and 22 Apr 1861, 'His only fault is that he is too minute - and occasionally too exacting.'

105) MH50/1, 12 Feb 1846, Wilkes also accompanied Lord Sandon to the Board to discuss interpretation of various clauses in the County Asylums Acts, and was anxious to avoid the build up of chronic patients which he was encountering; Coton Hill was established in 1854. Shaftesbury was involved in this to some extent as was his old friend from the Health of Towns Association Lord Sandon, now created Earl Harrowby. See SHA/PD/6, 1 Dec 1851, 'with Harrowby to Stafford to make a 'flare-up' at a public meeting about lunatic asylums.'

106) PRO/MH50/1, 15 Aug 1845, 10 Dec 1845, 12 Feb 1846, 21 Apr 1846, 6 May 1846 and 1 Oct 1846; MH50/5, 16 Apr 1851 Wilkes came to the Board about the proposed House Tax on Staffordshire Asylum and on 31 Dec 1851, he sent newscuttings of a scandal at Wolverhampton Workhouse.

107) J.M.Sc. Vol 1, No.11, Feb 1855, pp.168-9, 'The Administration of Food to Fasting Patients' and p.190, 'Concerning India Rubber Chamber Pots.'

108) LC Further Report 1847, pp.276, 429, 460, 477, and 492-3 for the practice of these doctors.

109) J.M.Sc. Vol 24, 1878, p.321.

110) Forster MSS, 48 E 32, P to F, 22 Aug 1856.

111) See chapter 6, section on county asylums; Also Forster MSS, 48 E 32, 7 Sep 1856 and 26 May 1856.

112) Hunter and Macalpine, Psychiatry for the Poor: A Medical and Social History passim.

113) Granville, The Care and Cure of the Insane Vol 2, pp.103-8. Granville remarked in 1877, 'The Commissioners in Lunacy have, from time to time, attempted to supply a new impetus to progress. I cannot think they have been altogether successful. It is clearly outside the province of a mixed Board to deal with the matter of treatment. The circular issued in 1846 [on which the Further Report 1847 was based] elicited replies of scarcely any practical value. They settled no question and advanced no interest.' Mortimer Granville contrasted the Lunacy Commission's discretion favourably with the policy of the Scottish Lunacy Commissioners which had attempted to interfere in matters of pathology and treatment. 'The attempt to wander out of its province must detract from the respect due to the authority of a body whose immediate business is distinctly limited to the superintendence of general arrangement.'

114) Monks Roll, Vol 3, p.73; Forster MSS, P to F, 7 Sep 1862.

115) See footnote 62, apart from being a leading light in the A.M.O.A.H.I., Bucknill had pioneered a cottage system in Devon for convalescent patients to recover away from the asylum. After Nairne's appointment he was less sympathetic in his support for the Commission; J.M.Sc. Vol 4, No.23, Oct 1857. The latter clearly continued to rankle. Nairne's obituary notice in 1887 (J.M.Sc. Vol 32, p.626) was less than complimentary and referred to Nairne's inexperience on appointment.

116) Reginald Southey, Commissioner 1883-89, Clifford Allbutt 1889-92, and Sidney Coupland 1898-1921. Also William Rhys Williams 1878-89, who had county asylum experience as an assistant MO, but came to the Commission from the superintendency of Bethlem Hospital. These four constituted almost half of the medical Commissioners appointed after Nairne, in the period up to 1900. For biographical details see Mellett, 'Bureaucracy and Mental Illness: The Commissioners in Lunacy 1845-1900' in Medical History No.3, Jul 1981.

117) J.M.Sc. IV, No.23, Oct 1857, Hatchell who was appointed in Ireland, had been surgeon to the Irish constabulary for nine years. The reason he was appointed was almost certainly because he was the Lord Lieutenant's Household Physician. Dr Cox in Scotland was a protege of the Duke of Argyll (son of the 7th Duke who obtained the appointment of W G Campbell to the English Lunacy Commission.)

118) Medical Circular and General Medical Advertiser Vol 2, 13 Apr 1853; Herbert and Thomas Mayo, Forbes Winslow, AJ Sutherland and John Webster (a Bethlem governor with a lifelong interest in the insane).

119) MH50/8, 30 Nov 1855, The Commission sent a glowing record of their sentiments to his wife, when he died.

120) For Mylne's views see, PRO/CO7/73, 16 Mar 1842, Mylne to Shaftesbury; Also PRO/CO54/186, 2 Jun 1840, Mylne to R Smith M.P. at the Colonial Office. Mylne also had considerable experience of working in Chancery.

121) Forster MSS, 48 E 32, 22 Aug 1856 and 6 Aug 1861.

122) Leigh Hunt knew Bentham quite well and had been visited by him when in gaol.

123) Carlyle was a close friend of Forster, and was also admired by Procter and Prichard. His influence generally as a social prophet and critic in Victorian times was enormous, and his trust in authority and strong leaders would certainly have appealed to Shaftesbury. Carlyle like his great rival Macaulay was no lover of utilitarianism, and attacked the political economists for what he saw was their contribution to the Condition-of-England question. Several of the Lunacy Commissioners were acquainted with German Romanticism through Carlyle.

124) Morison Diaries, 29 Jan 1846; Forster MSS, 48 F 65, 28 Jan 1862, Winslow had been expecting a better [wealthier] patient, but then found these clients could not afford his rates of upkeep. The young man offered to move his sister to Bethlem once this could be organised, 'but the Holy Winslow said that if he did not remove her

at once he would send her home to her mother.' When he went back to Winslow with Procter's message, Winslow said he would charge him 7 guineas a week, then 2 guineas a day, if he did not remove his sister. Ultimately the Commission signed a transfer to Camberwell House Asylum.

125) W G Campbell was also a distant relative of John Campbell, the future Lord Chancellor, and friend of Mylne's.

126) Peel MSS, 40557, ff.86-88, Argyll to Peel 4 Jan 1845 and Peel to Argyll, 10 Jan 1845; f.90, W G Campbell to Peel, 13 Jan 1845, about the assistant solicitor to the Excise post; 40562, ff.128-30, Argyll to Peel, 9 Mar 1845 and Peel to Argyll, 11 Mar 1845; 40572, ff.117-19, Argyll to Peel, 9 Aug 1845 and Peel to Argyll, 11 Aug 1845.

127) PP 1859 2nd Sess, VII, pp.47-62.

128) Chadwick MSS, 535, 15 Nov 1845. Chadwick had in fact assisted Lord Brougham in his last case before elevation to the Woolsack, that of the tea dealer Mr Davies (see Times 19-28 Dec 1829, and also 'Liberty and Lunacy: The Victorians and Wrongful Confinement' in J.Soc Hist II) at which time he had had occasion to observe how imperfect were the notions of medical men as to the treatment of such cases. This should have struck a chord with Shaftesbury.

129) Mellett, Society, The State and Mental Illness 1790-1890 (PhD Thesis) p.290;

130) The Duties of Lay Commissioners fell into three groups: A) In conjunction with two professional Commissioners they could visit hospitals and licensed houses on routine circuits; make special visits to order release; regulate the dietaries of paupers in hospitals or licensed houses; visit county and borough asylums and gaols. (8 & 9 Vict c.100, ss.61, 77, 82 and 110). B) Individually they could order a search to be made of an Institution's registers; order the admission of relatives or friends to patients in hospitals or licensed houses; and visit single patients (8 & 9 Vict c.100, ss.34 and 85; 16 & 17 Vict c.96, ss.27 and 96). C) In company with one other non-professional Commissioner, they could make night visits to licensed houses and hospitals. In the Metropolis, they could make special visits to licensed houses with a view to recommending to the Board that a patient be discharged; they could sanction the removal of a patient from a hospital or licensed house, and had the right to summon witnesses. They might also sanction the transfer of a private patient to an asylum, or the retention of a patient as a boarder after he had been discharged as cured (8 & 9 Vict c.100, ss.71 and 76; 18 & 19 Vict c.105, ss. 17 and 100; 16 & 17 Vict c.106, ss.16 and 20) Cp. the evidence of R W S Lutwidge, PP 1859 1st Sess, III, p.46.

131) PP 1859 1st Sess, III, pp.214-73 and PP 1859 2nd Sess, VII, pp.1-32.

132) MH50/6, 6th, 8th and 9th Nov 1852; MH50/5, 4 Aug 1852. Very occasionally he came to Board meetings when a Chancery patient was involved (see MH50/2, 2 Feb 1848) but this was rare.

133) PP 1859 1st Sess, III, 101-129; Forster MSS, P to F, 3 May 1861.

134) After Clifford there was only one other lay appointee, Dudley Fortescue who succeeded Gordon three years after his death, in 1867. Clearly this form of appointment had become an anachronism by the 1860s, especially as professional Commissioners were responsible for so much of the work. Thereafter only Honorary Commissioners were appointed.

135) Shaftesbury 168 out of 234 meetings, Gordon 123/234, Clifford 64/234 and Vernon Smith 5/234. Overall figures during this period suggest 4.27 professional and 1.53 lay Commissioners attended each meeting.

136) Bethlem Hospital Archives, Bethlem Hospital Visitors' Book 1854-88, entries for 2 Feb 1854, 2 mar 1855 and 9 Jun 1855; MH50/10, 3 Aug 1859.

137) MH50/10, 23 May 1860, for his investigation of Bethel Hospital, Norwich.

138) MH50/4, 16 May 1850; MH50/6, 21 Mar 1853.

139) MH50/2, 16 Mar 1848 Gordon proposed that Dubois be asked to examine the Votes and Proceedings of both Houses of Parliament daily, and notify the Commission of anything relating to lunacy.

140) MH50/3, 19 May 1848. Almost certainly in Nos.25-27 of the Circulars Book which are missing. See also MH50/5, 5 Sep 1853 for circular Gordon prepared on the new Lunacy Acts.

141) MH50/5, 19 Jun 1851 and MH50/10, 21 Mar 1860.

142) MH50/7, 29 Jun 1854 and MH50/10, 17 Oct 1858; MH50/7, 25 Jan 1855.

143) MH51/49, passim; MH50/8, 6 Aug 1856; Also MH50/7, 5 Jul 1854.

144) Forster MSS, 48 E 32, P to F, 1 Nov 1862, Procter wrote, 'Mr Gordon was here the other day. He did not come to the last Board. Thank God for all things.' Also P to F, 8 Nov 1861, he depicted Gordon as, 'embroiling the fray.'; P to F, 9 Mar 1862 for Commissioners' reports tallying.

145) Smith was a shareholder in the New River Company.

146) PRO/MH51/40 Report by the Visiting Commissioners on John Lucock.

147) PRO/MH51/738, Minutes of Evidence taken before the Commissioners; SHA/PD/4, 28 Aug 1846.

148) Seymour succeeded Shaftesbury's childhood friend Lord Carlisle (George Howard, Lord Morpeth until he became Earl); Finlayson, Lord Shaftesbury pp.287-8; See Lewis, Edwin Chadwick and the Public Health Movement, pp.265-6. In January Shaftesbury wrote, 'Seymour's insolence at the Board of Health (which he never attends) is

intolerable - I bear it for sake of remedial measures.' SHA/PD/6, 8 Jan 1851. See also 9 Jan 1851 and 11 Jan 1851.

149) MH50/3, 4 May 1848.

150) Forster MSS, P to F, 21 Jul 1862.

151) Forster MSS, 48 E 32, 27 Jul 1863; Procter clearly felt Clifford had little concern for his welfare when the latter showed no interest in whether Procter got a pension or not, 48 F 65, P to F, 28 Jul 1861.

152) PP 1860 XXII, Select Committee's Report.

153) Provincial Licensed Houses were visited four times a year by the magistrates, and county asylums were also visited at least quarterly by Visiting Magistrates.

154) In the provinces the Visiting Justices appointed by Quarter Sessions licensed private asylums.

155) This injunction created real problems in 1848 during the long and severe illness of Dr Hume, and Prichard's absence due to his son's alarming state of health. Only Turner was left to accompany legal Commissioners on visitations. It was decided these visits were essential, and that legal Commissioners who were not away on provincial circuits, could visit Metropolitan Licensed Houses receiving private patients, on their own, and at their own discretion. Houses taking paupers still had to be visited by at least two professional Commissioners. The Board's minutes added, 'so far as it is competent for the Board to give authority.' In fact it had no such authority. The Act did not provide specifically for illness, although the Home Secretary and Lord Chancellor were empowered to appoint 'other persons' to visit and report to them on the state of any asylum, hospital, gaol or house where a patient was confined (8 & 9 Vict c.100, s.CXIII). To have invoked this clause would of course have meant acknowledging that the Commission was not working.

156) It also had to provide a detailed return of all the patients and institutions visited, all the miles travelled and the cost of its expenses; see PP 1850 XLIX 99 and PP 1851 XLIII 379 for examples of this. In those two years the professional Commissioners travelled a total of 48,155 miles at an average of 4,012 miles a year each. In the same two years they saw 81,297 patients, at an average of 6774 each a year.

157) MH50/1, 26 Feb 1846: There were four circuits (a) Northern, centred on Manchester/Liverpool and Newcastle/York; (b) Midland, centred on Birmingham and Norwich; (c) Western, based on Bath/Bristol and Salisbury/Exeter; (d) Home, centred on Surrey/Kent/Sussex, Hants/Berks/Oxon and Bucks/Beds/Herts/Essex; Workhouse circuits were worked out separately see chapter 4 below, and also MH50/6, 16 Feb 1854.

158) The Private Committee was set up to deal with all patients confined singly and was meant to ensure absolute privacy for the families concerned. In 1853 the care of single patients became the

responsibility of the whole Commission. It had found the limitation of this piece of business to three Commissioners unworkable because of their overlapping commitments. See MH51/236, Circulars Book, Circulars No.3 and 5.

159) MH51/236, Circulars No.7 and 8; MH50/1, 8 Oct 1845 5 Nov 1845. See also HO44/70, HO to LC, 3 Nov 1845.

160) LC Further Report 1847, pp.1-50. Mellett's account of the Commission appears to be largely based around the detailed description of its workings given at this time.

161) Symonds, Some Account of the Life, Writings and Character of the Late J.C.P.; Lincoln Central Library, Tennyson MSS, Emily Tennyson to Forster, 18 Jun 1856; Lytton MSS, D/EK/C27, EBL to Forster, 31 Dec 1855; Procter's friends reacted differently, Landor's remark being the most amusing, 'So you are a Commissioner of Lunacy. I must put on my best behaviour when you visit me; and I request you not to bring forward this letter against me,' quoted in Patmore, Biographical Notes.

162) Reginald Southey, a later Commissioner, was another who had to retire through ill health after being knocked down by a cab; For Lutwidge see British Museum Add MSS, Carroll Journals, Vol 5, entry dated 27 May 1857.

163) Armstrong Browning Library, Baylor University, Waco, Texas, Ms, Forster to Carlyle, 11 Jul 1870. He wrote, 'an assault was made upon me, by one of a very dangerous class of men - an insane Indian soldier whose delusion was that I had ordered his food to be poisoned. I had reason to complain of the authorities & attendants of the Asylum - but the terrible suddenness of the frenzy was some excuse....there is now no external mark of the injury. Unfortunately however there was 'effusion' in some of the small vessels of the eye & brain - and I have ever since had the sense of a film or veil passing almost continually over the left eye, the opposite side to that on which the blow was struck.'

164) Gaskell: PRO/C211/30, affidavit signed by Gaskell on Ann Hallam; Turner: PRO/J103/2, docket for 3 Apr 1854 and J103/3, Bond No.40; File on Misconduct Cases, Nairne to Sir Henry Pitman, 27 Jul 1875 and 28 Jul 1875.

165) Quoted in Davies, Forster: A Literary Life pp.116-17.

166) PP 1860 XXII, p.34.

167) Lytton MSS, D/EK/C23/16, D/EK/C14, D/EK/C22 and D/EK/C27.

168) See Monsarrat, Thackeray: The Uneasy Victorian p.161; Magnus, Gladstone p.81. In the case of Helen Gladstone this was of some consequence as her 'illness' seems to have consisted of opium addiction and a leaning towards the Catholic church. It seems she was also eccentric in her dress, and in the hours she kept, but it is at least equally as likely that she merely reacted against the intolerably sombre Gladstone household.

169) Gaskell, 'On the Want of Better Provision for the Labouring and Middle Classes when Attacked or Threatened with Insanity' in J.M.Sc. Vol 6, (1860) pp.321-27; Procter too supported this, see Forster MSS, 48 E 32, P to F, 5 Sep 1869.

170) J.M.Sc. Vol 4, No.24, Bucknill's review of the 8th AR of the Irish Inspectors of Lunatic Asylums, 1857.

171) British Museum Add MSS, Layard Papers, 34624, f.523, letter from Procter to MacVey Napier, 13 Jul 1844; Brougham MSS, 24545, 10 Jan 1863.

172) For colleagues covering his work, Forster MSS, P to F, 26 Oct 1858; Forster MSS, 48 E 32, P to F, 17 Aug 1856, for Procter sending mail addressed so that Forster could open it before Lutwidge; Forster MSS, 5 Jan 1858 for their meeting before a Board to concert their action; Also 17 Jan 1863 for acting together over a workhouse clause in the proposed legislation; Procter became such good friends with Wilkes that he asked the latter to erect a headstone for him after his death.

173) Procter who disliked Lutwidge wrote to Forster on one occasion that Wilkes was going to travel with Lutwidge, remarking, 'he does not like it - and I quite feel his distaste for his colleague.' However Lutwidge's family accounted Wilkes a good friend and consulted him from time to time after the latter's death, see Forster MSS, 48 E 32, P to F, 22 Apr 1867; also Cohen, The Letters of Lewis Carroll Vol 2, pp.1043-44.

174) MH50/9, 20 Jan 1858 and 26 Jan 1858, when Nairne was refused admission to Hertford Jail, Lutwidge was sent back with him to try a second time.

175) MH50/1, 17 Dec 1845; MH50/4, 7 Nov 1849; MH50/5, 7 Apr 1852, 21 Apr 1852 and 29 Apr 1852.

176) MH50/6, 4 May 1853 and 11 May 1853. The Lunacy Commission's offices subsequently moved to Victoria Street in the 1860s.

177) 8 & 9 Vict c.100, s.XI; MH50/1, 9 Oct 1846 for the poor law clerk.

178) .

	Martin	Barlow	Mitchell	Maule
MH50/2, 2 Feb 1848	£120	£110	£100	£90
MH50/4, 24 Jan 1850	£180	£130	£110	£110

An additional writing clerk, Charles E Lambert was hired at £80 p.a. on 1 Feb 1850 as part of this reorganisation.

MH50/6, 28 Jan 1854

	Minimum	Annual Increase	Maximum
Martin	£250	£15	£400
Barlow	£150	£15	£200
3rd, 4th and 5th Clerks	£100	£5	£150

6th Clerk and accountant £52

179) MH50/1/15 Aug 1845; see Brougham MSS, 580, Dubois to Brougham, 16 Sep 1845. The accounts were refused by the Treasury when presented by Dubois because they were too extravagant, a fact pointed out to them by Shaftesbury and Gordon. 'The Act provides that travelling Expenses of the Commissioners shall be defrayed, but they charge 1/- a mile, and travelling by rail (and at present for the most part ex necessitate) it does not cost them more than about two pence a mile, making a difference in the actual expenditure of some 7 or £800 a year. Now the auditors say that the Act never contemplated a *profit* on Travelling expenses, and they thought that Vouchers, shewing the actual expenses, should be sent in. I told them that I had none such to present, and at first they observed that as they were gentlemen, it must be left to their honour - but afterwards one of the auditors informed me that Vouchers for the actual expenses would in future be required. In the case of Vouchers vs. Honour, I am inclined to back the former.'

180) MH50/2, 7 Jul 1847, 20 Jan 1848; MH50/3, 31 Mar 1848.

181) MH50/4, 14 Feb 1850; Forster MSS, P to F, 3 Sep 1857, 'I got a letter from Gaskell the other day...and speaking of the Board for the 23rd - I wrote in reply telling him that we must all (or rather 5 of us) be in Whitehall Place that day - otherwise the clerks must go without their salaries for three months.'

182) MH50/4, 24 Jan 1850; Forster MSS, 48 E 32, P to F, 16 Oct 1856, 'I have a good fire at my back and Mrs Masters (The Samaritan) is now making me a cup of tea'; 30 Sep 1857, 'the peerless Martin (far beyond Day) is here again. My boots shine at the mere mention of his name'; 15 Oct 1860, 'The office goes on as usual Martin (The Steady) keeps things in order'; 11 Jan 1867, Procter reports chatting with Martin, Mitchell and Rawlins on a visit to the office after his retirement;

183) Lytton MSS, D/EK/C23/16, Forster to Lytton, 17 Nov 1868, 'Rawlins my old clerk, will copy the play in his leisure evenings.'; for remembrance in Forster's will see, Davies, Forster p.260; Rawlins also wrote a short biography of Forster which is held at the Huntingdon Library, San Marino, California.

184) MH50/4, 7 Nov 1849; MH50/10, 8 Jun 1859; MH50/4, 8 Aug 1850.

185) PP Ist Sess, III, p.18; MH50/4, 27 Mar 1851; MH50/7, 30 Mar 1854.

186) MH50/7, 31 Jul 1855; MH50/8, 6 Jan 1858; Forster MSS, P to F, 5 Jan 1858.

187) MH50/8, 20 Jan 1858.

188) See Wright, Treasury Control of the Civil Service chapter 5. It is unclear why this decision was taken, but probably reflects Shaftesbury's preference for the older system of patronage.

189) Morison Diaries, MH50/1, 31 Oct 1845; HO34/7, 2 May 1846.

190) William Moffat (1808-82) Scottish Pupil of William Burn. In partnership with William Hurst building churches. After Hurst's death he went into asylums and workhouses. Built: Leeds Borough Gaol and worked on Chatsworth; West Riding Asylum and North and East Riding Asylum; William Moseley (c.1799-1880) Pupil of George Julian. Practiced in London. County Surveyor of Middlesex 1829-46. Enlarged Middlesex House of Correction, Coldbath Fields 1830. Added wings to Hanwell 1838. Built Surrey County Asylum 1839-41. Middlesex House of Detention Clerkenwell 1845-6. Completed Rainhill County Asylum 1847-51; Harvey Lonsdale Elmes (1814-47) Studied under father and uncle. Built Liverpool Assize Court. Built West Derby Asylum, Rainhill.

191) MH50/2, 11 Feb 1847 and 18 Mar 1847; Hardwicke (appointed 16 Apr 1847), Fulljames (25 May 1848) and Donaldson (22 Jun 1848). No biographical details have been found.

192) MH50/2, 29 Mar 1847. See also HO34/7, Grey to LC, 28 Nov 1846 for earlier conflict with the Derby Visitors who wanted a more expensive asylum.

193) This principle was clearly cemented by 1859. See MH50/10, 16 Feb 1859. When Glamorganshire asked for the names of architects who had designed recently erected asylums the Commissioners were careful to point out that there was no favouritism in the list given, and it was not intended to show, 'the desirability of employing exclusively in the construction of a new asylum, such architects only as had already been engaged in similar works.'

194) These figures are based on Annual Returns to Parliament, PP 1850 XLIX, 99; PP 1851 XLIII, 379; PP 1857 Sess I, XIV, 197; PP 1859 Sess I, XXII, 175; PP 1860 XL, 41; PP 1861 XXXIV, 607. Figures for 1860 include the engineer's fees with the architect's. Also in the year ending 1857 the legal fees were not included in the account, nor thereafter, because they were moved from the Consolidated Fund to the Votes of Supply. The architect's fees should therefore have shown up as an even bigger percentage.

195) St Giles House, Shaftesbury Estates, Shaftesbury MSS, C 25155 to C 25158.6/ 7th Earl.

196) MH50/4, 24 Jul 1850.

197) MH51/ 535 for a series of opinions about post mortems.

198) MH50/3, 9 Aug 1848 and 24 Aug 1848.

199) Richard Dugald Grainger (1801-65) Son of a Birmingham surgeon. Educ. Birmingham Grammar and St Thomas's Hospital. Attended Webb St Anatomical School. MRCS 1822, FRCS 1843. Professor of Anatomy and Physiology St Thomas's 1842-60. FRS 1846. Cholera Inspector 1849. Inspector under the Burials Act 1853-65. Children's Employment Commissioner 1862. Author: Sanitary Report on Cholera 1848-9.

200) MH50/3, 8 Mar 1849 The Commission decided Lovick would not be convenient as he could not make himself available whenever the Lunacy Commission wanted him.

201) See LC 10th AR, 1856, p.3.

CHAPTER 4 FOOTNOTES

- 1) For evidence of this see Morison Diaries for numerous entries of reports sent to other superintendents ie. 30 Jul 1841 Bethlem reports were sent to Falret in Paris for distribution in France; 25 Sep 1841 Morison thanks Thurnham for his account of the Retreat; 2 Oct 1841 Morison receives account of restraint used at Lincoln; 10 Mar 1843 Surrey reports sent by Morison to Drs Button, Tyerman, Kirkman and Hewitt (in Barbados); See also entries for 15 Nov 1845, 9 Jul 1846 and 17 Jul 1846; Also Royal College of Psychiatrists, Minute Book of the Medico Psychological Association, Meeting in 1851 reports the informal interchange of reports between Britain and America; Scull, 'The Discovery of the Asylum Revisited, in Scull (ed) Madhouses, Mad Doctors and Madmen.
- 2) MH50/1, 9 Oct 1845; HO44/70, 3 Nov 1845.
- 3) J G Perry (1800-67) Trained at St Barts Hospital. FRCS. Governor of various London Hospitals. Became a Prison Inspector in 1843.
- 4) HO45/OS/1452, LC to HQ, 19 May 1846; LC to HQ, 24 Jun 1846; MH50/1, 3 Sep 1846.
- 5) HO45/OS/1435, Shaftesbury to Sir G Grey, 28 Nov 1846.
- 6) HO45/OS/1435, 10 Nov 1846.
- 7) Medical Circular Vol 4, No.93, p.255, 12 Apr 1854; and Vol 4, No.101, pp.395-6, 7 Jun 1854; For Norfolk see Vol 5, No.105, 2 Aug 1854 and 16 Aug 1854.
- 8) PP 1847-48 XXXII, App H.
- 9) 16 & 17 Vict c.96, s.30 stipulated that charity and subscription hospitals must have their rules approved by the Home Secretary, which effectively meant, by the Commission.
- 10) Most notably a Register of Violent Incidents and the use of open fires.
- 11) The subscription hospitals posed a particular threat, not only because they had established management systems, but also because several had a reputation for healing the insane.
- 12) For Bucknill's views see J.M.Sc. Vol 1, No.3, 15 Feb 1854, Bucknill laughingly suggested that Visiting Physicians might make use of the electric telegraph to act as visitors to several different asylums simultaneously. He also talked of their desire to, 'gild the solid pudding of lucrative private practice with the honour of public distinction.
- 13) 8 & 9 Vict c.126, s.42 replaced by 16 & 17 Vict c.97, s.55.

- 14) See MH50/1, 9 Jan 1846. The Commission supported the appointment of clerks separate from the MO to do many of the administrative tasks, and the clerk was responsible to the magistrates.
- 15) See Finnane, Insanity and the Insane in Post Famine Ireland, pp.42-48.
- 16) HO45/OS/6513, letter dated 3 Jul 1858, Dr Corrigan MD opposed this view and asked S H Walpole the Home Secretary to publish his views as a minority report. This was refused; See also discussion in the Medical Circular Vol 9, No.210, Jul 1856.
- 17) Medical Circular Vol 4, No.94, pp.279-80.
- 18) MH51/236, Circular Letters Book No 1, 1845-63, Circular No.11, 12 Nov 1846 and No.16, 28 Apr 1847.
- 19) HO45/OS/1864, this related to Circulars No.15 and 16.
- 20) In addition to the Circulars quoted see the LC Further Report (1847) App.E.
- 21) The desirability of an elevated site was not a universally held belief at this time. Dr Jacobi complained that some sites were too high/exposed, and that this also meant more difficulty in getting a water supply, because the water table was so far away, see Conolly, The Construction and Government of Lunatic Asylums p.9.
- 22) LC 7th AR, for the rejection of a site at Swansea because it was next to a copper smelting and patent fuel works, and also a neighbouring swamp.
- 23) For a comparison between the Commission's guidelines and Conolly's ideas see, LC Further Report (1847) App.E and Conolly, Construction and Government of Asylums pp.6-14.
- 24) LC 10th AR, 1856, p.28, later the Commission relaxed this rule because of its architects' recommendation that third storeys were cheaper than erecting new buildings.
- 25) MPA Minute Book, Meeting 23 Jun 1847. Gaskell was in fact opposed to Conolly's idea of one long continuous structure, preferring a greater separation and detachment of buildings. In time some county asylums were encouraged to erect more detached residences in the grounds, although this also led to bigger asylum sites. Less encouragement was provided for Bucknill's scheme which was houses for convalescent patients out in the community, an arrangement which had arisen by chance when accommodation became short at Devon County Asylum.
- 26) Similarly the erection of numerous workshops increased the number of outbuildings on site.
- 27) LC 15th AR, 1861, p.131, at Cambridge Asylum for the dead house; MH50/2, 23 Dec 1846 at Birmingham Asylum the Commission decided not, in the end, to insist on separate entrances to the chapel.

- 28) See HO45/OS/3812, Essex's contracts were only approved after the Commission's amendments, which produced a saving of £2,750.
- 29) HO34/9, 21 Sep 1849, Grey to LC; LC 8th AR, 1854, p.16.
- 30) LC 7th AR, 1852, p.8.
- 31) In 1855 Grove Place and Belle Vue were both stopped from taking paupers after discussion with the magistrates, LC 9th AR, 1854-55.
- 32) This is mentioned in the Commission's 6th, 7th, 8th, 9th, 10th, 11th and 12th Annual Reports.
- 33) HO45/OS/3700.
- 34) MH50/8, 23 Jan 1856, Shaftesbury was also opposed to the suggestion that the City might obtain the Bethlem site, which the Commission had already stated was unsuitable for an asylum; For further discussion see chapter 6, section on charity hospitals.
- 35) Suffolk refused access to patients from Ipswich, Hampshire to patients from Southampton and Portsmouth. See chapter 6 for more detailed discussion of this in connection with the county asylum there.
- 36) HO45/OS/4875.
- 37) LC Further Report (1847), p.229; PP 1859 Sess II, VII, p.167.
- 38) Bucknill and Tuke, Manual of Psychological Medicine, p.40.
- 39) For an example of this see, Newington, 'Some Incidents in the History and Practice of Ticehurst Asylum,' in J.M.Sc. Vol.47, 1901, for Newington's complaints of interference in mustard pack treatment. I am indebted to C MacKenzie for this reference.
- 40) MH12/2239, for correspondence; See also Newton, Victorian Exeter, p.167; MH50/8, entries dated 28 Dec 1855 and 4 Jan 1856.
- 41) Medical Times Vol 2, p.577, death at a Stepney workhouse in 1851; MH50/11, 22 Aug 1860, deaths at Derby workhouse and 3 Sep 1860 at the Retreat, Mountstead.
- 42) For a more complete discussion see chapter 6.
- 43) Royal College of Physicians Edinburgh, these papers are together with Morison's diaries.
- 44) See Scull, Museums of Madness pp.175-6, for the example of John Millar who lost his job at Buckinghamshire County Asylum.
- 45) J.M.Sc. Vol 1, No.6, Jul 1854. Bucknill resented the Commission's praise of Samuel Hill's use of 'hard labour' at the North and East Ridings Asylum, suggesting that in future magistrates would be asking for superintendents with a recommendation from Mr Pusey's Agricultural College at Cirencester.

- 46) LC 10th AR, 1856, p.27. The Commissioners although favouring the provision of workshops and agricultural facilities, were most keen on patients being attached to officials engaged in industrial pursuits because this gave a patient the 'consciousness that he is useful, and thought worthy of confidence' especially where this involved removal, 'into a department where he enjoys a comparative degree of freedom. Of course there was only a limited amount of such work available.
- 47) For the Commission's ratios see the Further Report (1847) App.F; At Norwich in 1840 there were six attendants for 181 patients a ratio of 1:30.
- 48) LC Further Report (1847) p.108., 4th AR, p.8., 5th AR, p.10., and also MH51/236, Circular No.78, 31 Mar 1859; Conolly, Construction and Government of Asylums chapters 5 & 6.
- 49) NH51/236, Circular No.10 probably although this is missing; LC 5th Ar, 1850, p.10 for refusal to complete returns; 16 & 17 Vict c.96, s.XXVI; 16 & 17 Vict c.97, s.LVI (County Asylums); MPA Minute Book, Meeting at Derby 1 Aug 1856.
- 50) Medical Times Vol 2, 17 May 1851, pp.537-38.
- 51) Morison Diaries, entries for 4 Feb 1846, 3 Feb 1847 and 7 Feb 1850 for premiums paid to two of Monro's keepers, a nurse from St Lukes and one from Norwich.
- 52) MH50/9, 9 Jun 1858. This contrasts markedly with the Board's generous response in March 1858, when nine Commissioners and the Secretary all agreed to donate £10 to join the £300 left in a patient's Will, to form a fund on the lines of the Queen Adelaide Fund at Hanwell to help support pauper patients discharged from private asylums. Evidently patients were more deserving than attendants.
- 53) 16 & 17 Vict c.97, s.LVII.
- 54) PP 1859 1st Sess III, p.88.
- 55) Kent CRO, MH/Md2/AS6, County asylum Servants Register, see entries for Edward Ardagh hired 17 Sep 1877, sacked 13 Apr 1896; Henry Russell hired 16 May 1876, sacked 1896; In 1887 Henry Willis resigned after 15 years service, with what appeared to be delusions of suspicion and hallucinations of sight and hearing, but he was refused a pension.
- 56) Medical Times Vol XVI, No.408, July 1847, p.434; See also discussion on attendants at Kent Asylum in chapter six.
- 57) PP 1859 1st Sess III, p.85, Shaftesbury referred in terms of praise to the individualising system in Germany where the doctor knew all his patients.
- 58) Parry Jones, The Trade in Lunacy pp.89-90.
- 59) For example see LC 6th Ar, p.12 giving a list of subjects on which letters were sent to proprietors.

- 60) J. Psych. Med. Vol 1, p.33.
- 61) By 1900 there were only 70 houses in all.
- 62) For an account of Camberwell see chapter 6; For the letter to the Metropolitan asylums see, MH50/4, 5 Feb 1851.
- 63) MH50/8, 2 Apr 1856, the Visitors of Bensham Asylum asked for the Board to send representatives to their inquiry near Gateshead; MH50/6, 10 Feb 1853, for Grove Place.
- 64) 8 & 9 Vict c.100, s.82; MH50/9, 22 Jul 1857.
- 65) MH50/8, 9 Apr 1856; Also LC 11th AR, 1857, p.6.
- 66) MH50/6, 23 Mar 1854. In March 1854 the Board suggested that Grove House, Acomb, York should not have its licence renewed, but the following year its management passed out of the hands of a female proprietor and subsequent comment was less unfavourable.
- 67) For an example see LC 7th AR, 1852, for comments on the Visitors to Castleton Lodge, near Leeds who unfortunately did not concur in the views of the Commission expressed as to the shortcomings of Castleton. In the absence of their 'cordial co-operation' efforts to enforce a generally improved system of management were unsuccessful.
- 68) MH50/2, 15 Jul 1847. This report was distributed to the Superintendents of the chief continental and American asylums, and to those in Ireland and Scotland. Copies were also sent to the Poor Law Commissioners and to other foreign medical gentlemen to be selected by J C Prichard.
- 69) 8 & 9 Vict c.100, ss.XXIX, XXIV and XXVI.
- 70) For the Bucks magistrates see MH50/3, 28 Dec 1848; Failure to carry out statutory visits see MH50/8, 9 Apr 1856 for the Norfolk Visitors, MH50/10, 17 Jun 1859 and MH50/11, 28 Aug 1861 for the Lincolnshire Visitors; MH50/10, 19 Oct 1859 for the Durham Visitors.
- 71) MH50/1, 8 Oct 1846; See LC 13th AR, 1859, pp.58-59 for a more detailed list of inquiries that the Commission had established.
- 72) MH50/4, 1 Aug 1850. Mr Freeman was turned down because he had a previous conviction for taking patients who were not certified; The same was true for GS Ogilvie who had persistently taken illegal boarders at two previous asylums. He was refused a licence for Blythe House, Turnham Green in 1851, MH50/5, 12 Jun 1851.
- 73) MH50/3, 26 Jan and 26 Mar 1849.
- 74) 8 & 9 Vict c.100, s.LVII. In houses with under 11 patients the Commission could alter the number of medical visits to any figure between the stipulated twice a week and once a fortnight.
- 75) MH50/1, 27 Aug 1845 and MH50/9, 30 Mar 1858.
- 76) PP 1859 1st Sess III, pp.13-14.

- 77) MH50/7, 19 Oct 1854. Mrs Symmons was refused this licence; See MH50/7, 13 Jul 1854 for Mylne's volunteering to draw up a circular asking proprietors to make returns detailing who their MOs were. In 1859 Shaftesbury said that this requirement was a great stretch of the law, PP 1859 1st Sess III, p.13.
- 78) MH50/9, 15 Jul 1857, 14 Apr 1858, MH50/10, 9 Dec 1858, 16 Nov 1859, MH50/11, 13 Dec 1860. The Nesbitt's licence was granted after two refusals, and embarrassing scenes at the Board, where indecision amongst the Commissioners led to the Nesbitts having to withdraw from the room twice. The licence was refused initially because of the abuses which had occurred at Northampton Hospital whilst Nesbitt had been superintendent there.
- 79) MH50/8, 11 Jan 1856 for refusal to Diamond; MH50/10, 11 Jan 1860 for evidence of Diamond with a licence at Haydon Hall; For White's licence see LC 10th AR, 1856.
- 80) PP 1859 1st Sess III, p.12.
- 81) Arlidge the MO at St Lukes followed F Philp from St Lukes into this post. To see a critique of the monopoly created by the Commission see Corbet, 'Ought Private Asylums To Be Abolished,' in Westminster Review Vol 142, pp.369-80.
- 82) Nesbitt, A Letter to the Rt Hon The Earl of Shaftesbury, pp.8-9.
- 83) PRO/LCO/1/64, Shaftesbury to Lord Selbourne, 19 Feb 1855; Also Shaftesbury MSS, Cranborne St Giles, Anotated notes on his evidence before the 1877 Select Committee on Lunatics.
- 84) These figures are based on the Metropolitan Lunacy Commissioners 1844 Report and the LC 14th AR, 1860.
- 85) LC 6th AR, pp.14-16.
- 86) MH51/236, Circulars No.6, 7 and 8 were all concerned with Registers; Circular No.14 related to diet, 3 Apr 1847. This was the direct result of the revocation of a licence at Gate Helmsley Retreat, York, where a special investigation had shown that the Commissioners had been deliberately deceived about the diet. The Cook and servants had information, which was extracted from them with great difficulty, that only 4-5lbs of meat were put in pies for 91 patients, 40 private and 51 pauper. This worked out at about ½oz of meat for paupers after the private patients had been served first. Repeated remonstrance had failed to change matters, and the MO's dietary had been ignored by the lay proprietor, see Further Report (1847) pp.138-39; Also MH51/27/41, 53 and 53A for details of the evidence taken.
- 87) MH51/236, Circular No.28, 4 Jan 1849; also MH50/3, 7 Dec 1848 and 21 Dec 1848.
- 88) MH50/4, 9 May 1850 and 6 Mar 1851.
- 89) Times 4 Aug 1858. On 18th Nov 1854, a woman was found confined to bed by four chains at Heigham Retreat, Norwich.

90) In 1850 the Board recommended the Wiltshire magistrates not to renew the licence for Belle Vue House, Devizes because of repeated faults. This asylum had been warned about excessive restraint on five occasions. The magistrates continued to licence the asylum; In 1855 the Commission told the same Visitors not to renew the licence of Kingsdown House, Box, unless there were marked improvements. They refused to do this despite the appalling conditions.

91) MH50/6, 28 Jan 1854.

92) MH50/8, 27 Aug 1856 and 1 Oct 1856; For Dr Monro, MH50/8, 9 Apr 1857, and for Moat House, MH50/9, 8 Jun 1857.

93) Lancet 19 May 1860; MH50/10, 28 Mar 1860 and 18 Apr 1860.

94) Conolly, Construction and Government of Asylums pp.137-144; Browne, What Asylums Were pp.39-57.

95) See MH50/2, 13 Jan 1848 for proposed regulations for Licensed Houses.

96) MH50/9, 30 Mar 1858, MH50/10, 24 Jan 1860, MH50/11, 3 Jan 1861.

97) Mortimer Granville, Care and Cure of the Insane Vol 1, p.99, commented on the loss of status involved for the wives of asylum superintendents who acted as matrons: 'It is above all things indispensable that medical superintendents of asylums should be educated gentlemen, and if that is to be the case, their wives cannot be matrons. Indeed it is inconceivable that a man of position and culture would allow his family to have any connection with an asylum!'

98) In Apr 1857 it demanded a say in the selection of a matron for Munster House and in Oct 1857 called for the immediate dismissal of the MO of Haverfordwest Asylum.

99) MH50/11, 7 Nov 1860.

100) This organisation will generally be referred to by its initials below, ie. the A.M.O.A.H.I.

101) Co-founded by Shaftesbury's father, this society contained six Bethlem governors and three Surrey County Asylum Visitors. Other wealthy patrons such as the Duke of Norfolk and the Earl of Arundel had relatives or friends who had been treated by Morison.

102) J Purdie and E L Bryan (Hoxton), G M Burrows and J Bush (Clapham Retreat), J G Millingen (York House), W B Costello (Wyke House), W Wood and F Philp (Kensington House), E T Monro (Brooke House), A J Sutherland (Blacklands House), H W Diamond (Twickenham House), G W Daniell and Lady Ellis (Southall Park). There were also some provincial owners, including C Summers (Great Fosters), G Hitch (Sandywell Park) and J B Daniel (Bailbrook House). These men met regularly at Morison's House and elsewhere.

103) Other societies regularly used were the *Ethnological*, the *London Medical*, the *Royal Medical and Chirurgical*, the *Provincial Medical and Surgical Association*, the *Society for the Relief of*

Widows and Orphans of Medical Men, and the *Royal Medical Benevolent College* of which Shaftesbury was Chairman; See chapter 3, footnote 28 concerning Shaftesbury's contacts with asylum owners in the latter organisation.

104) Morison Diaries, Morison attended parties at Earls Court House, 18 Jun 1847; Kensington House, 16 Jan 1845; Bethlem, 5 Jan 1847; Winslow and Monro were known for their large *conversazione*, see for instance MPA Minute Book, meeting on 1 Jul 1857 for 400 at Winslow's house; Morison Diaries, 2 Jun 1843, Morison saw Conolly coming out of Elm Grove Asylum with several doctors after a party.

105) PP 1859 1st Sess III, pp.97-8.

106) See App E for a breakdown of Morison's practice; Also A J Sutherland who owned Blacklands House and Fisher House, visited patients in Kensington House, and supervised private lodgings; E T Monro and F B Winslow both owned asylums, had control of several lodgings and visited patients in other asylums; Less well known practitioners also sought to extend their contacts in this way. Edwin Wing who was Visiting Physician to Althorpe House and York House, and Resident Physician to Wyke House, at different times, also visited the East India Company lunatics at Pembroke House, and had consulting rooms at 7 Harley Place, Regents Park.

107) C Mackenzie's thesis (in preparation) on Ticehurst Asylum, Sussex, chapter 3, has recently confirmed a further link between the Commission and private asylum owners. Nairne was a contemporary of Charles Hayes Newington at Trinity College Cambridge, before going on to become a physician at St George's Hospital, where Newington studied for his LRCP. She also points out that although the Newingtons were not members of Morison's Society, they had working links with one or two members of the Society and other London practitioners like Winslow.

108) MH51/236, Circular No.32, 12 Feb 1850.

109) MH50/8, 31 Jan 1856.

110) MH50/8, 1 Apr 1857; MH50/9, 3 Mar 1858.

111) Medical Circular Vol 9, 1856, p.8.

112) Manor House Chiswick had formerly counted Lord Lyndhurst and Shaftesbury himself amongst its pupils, before becoming an asylum; Camberwell House was formerly the Royal Naval School Camberwell.

113) MH50/9, 22 Jul 1858; MH50/11, 7 Nov 1860.

114) It was quite common for proprietors to stipulate working conditions for staff. See MH50/5, 30 Apr 1851 for Winslow making his staff sign a rule binding them not to communicate with relatives of the patients. He also made his MO sign an agreement not to practice outside the asylum, MH50/9, 25 Nov 1857.

115) Hertfordshire CRO, D/Z24/B25, Deed of co-partnership dated 31 Aug 1877; For further detailed contracts see GLC Record Office, Acc 623/60, 26 page deed of co-partnership for Southall Park asylum

between J B Steward MD of Droitwich Asylum and G W Daniel surgeon Hyde Park, in which they paid £6,000 for the goodwill, fixtures and furniture of the asylum, £5,000 to be paid at once, and if the profits were less than £4,100 in the first year, the shortfall would be deducted from the £1,000 remaining; Also Acc 1063/164-5, Articles of co-partnership between Mary Monro and James Smith surgeon for Hadham Palace. The goodwill was £5,060. The owner of the building was the Bishop of London. M Monro was to get a seventh of the receipts, and Smith six sevenths. Interest was to be paid on the investment every year and two arbiters were appointed in case of arguments. The consent of both partners was needed for payments of over £500; Also Acc 523, Lease dated 1857 for Lawn House, Hanwell to J Conolly, E T Conolly, Henry Hall, Cheslyn Hall and Maria Commerell.

116) MH50/7, 19 Oct 1854 and 30 Nov 1854.

117) MH50/8, 8 Aug 1855 and 4 Jan 1856, for North Bank and Burman House, Warwickshire.

118) MH50/10, 2 Jan 1859.

119) Medical Times Vol 16, pp.573-74.

120) In 1847 one of the partners at Acton House was made a bankrupt, as was Dr Nicholson of Walton Lodge Liverpool in 1855. The owners of Haydock Lodge went bankrupt and did not pay the staff for some months before closing down; In 1859 William Conolly went bankrupt and John had to bail him out of his difficulties.

121) Medical circular 6 Jan 1864; Other asylums advertised included one yielding a net income of £900 p.a., coming in at £2,500; another the same year in Southern Ireland, for both sexes, and 'capable of great extension' asked £2,000 outlay and promised £400 p.a. profits.

122) These agents were only four doors down from the Metropolitan Lunacy Commissioners' office in Adelphi Street, and round the corner from E T Monro's house.

123) Medical Times Vol 2, May 1851, pp.537-38.

124) MH50/9, 10 Mar 1858.

125) See Medical Directory 1857, p.23 advertisements section. Monro, Morison and Sutherland were among those who used this Association.

126) For Chapman and Potters see Kent CRO, MH/Md/As22, Book of Reprimands, for staff hired by the matron from Chapman and Potters; For London Nurses Institute see Medical Press and Medical Circular 6 Mar 1867;

127) McCandless, 'Lunacy and Liberty: the Victorians and Wrongful Confinement,' in Scull (ed), Madhouses, Mad Doctors and Madmen.

128) As early as 1833 Sir William Ellis asked Morison to procure patients for his sister-in-law Susan Wood at Elm Grove Asylum. He also obtained custom for Southall Park and London House. At Earls Court House, Morison received two guineas a visit although he

recorded in March 1847, 'Mrs Bradbury expects a portion of my interest - how small!' Clearly he did not provide enough patients, because in May 1848 she complained of having too few, only 27, when she could accommodate 40. She subsequently released Morison from their agreement, only to rehire him when he had explained more clearly his commitments to other institutions, Morison Diaries, 9 Mar 1847, 30 May 1848, 4 Nov 1850 and 6 Nov 1850. See Appendix F for Morison's network of family contacts.

129) J.M.Sc. Vol 5, 1860. Report of the Annual Meeting of the A.M.O.A.H.I.; In 1857 John Conolly's son-in-law Charles Fitzgerald was quizzed by the Commission about an alleged % paid to William Conolly on account of six patients at Hayes Park, MH50/8, 4 Mar 1857; In 1861 the Board took William to task again after finding his name on one of the medical certificates for a patient, MH50/11, 23 Jul 1861.

130) HO45/OS/6686, for discussion of the case; Also MH50/10, 16 Mar 1859. It is possible that Boddington who proved a lot less helpful the following month, refusing to give the Commission details of his financial arrangements as regards staff, had an interested motive in this issue. Conolly had slighted him in 1855, when remarking that the habits and practices of an asylum were purchased with the patients. He cited Boddington as an example of a man whose only experience consisted of working in a village dispensary (not so very different from Conolly's background) and described him as someone who was 'incredibly ignorant' of the non-restraint system, J.M.Sc. Vol 1, No.12, Apr 1855.

131) MH50/10, 21 Jul 1859.

132) For Brandenburg, Sussex, Hoxton and Whitmore see PRO/MH51/44A, case papers on West Malling Asylum; for Effra see Medical Directory 1856; for Cowper House and Stoke Newington see Medical Directory 1849; for Earls Court House Medical Directory 1846 and for Peckham House Medical Directory 1854.

133) MH50/10, 6 July 1859.

134) See Appendix G for a history of the Commission's relations with Dr Seaton, who was accounted a reasonably respectable proprietor. It illustrates the casual attitude which many asylum owners took to the Board's regulations.

135) See HO45/OS/2797, for pamphlet of the Evidence Taken on Inquiry into the Management of Fishponds Private Lunatic Asylum; At neighbouring Ridgway House run by Dr Ogilvie, was another patient who was incarcerated because he intended marrying and his family feared he would sign his property over to his wife. Ogilvie's daughter told Purnell that the man was an 'acquisition' to their establishment. When the patient tried for a second time to get married Ogilvie protected his asset by changing his status from voluntary to compulsory confinement. Ogilvie got £260 for this patient but only provided miserable accommodation.

136) See ALFS Annual Report 1851.

137) RCP MSS File on misconduct cases, entry for 26 Oct 1859; see also Newton, Victorian Exeter p.167.

138) MH50/9, 14 Jul 1858. For an account of the Leech case see McCandless, 'Lunacy and Liberty,' in Scull (ed), Madhouses, Mad Doctors and Madmen; In June 1858 the Board questioned the surgeon at Heigham Hall, Norwich, about his part in preparing a patient's Will, MH50/9, 16 Jun 1858.

139) MH50/11, 25 Mar 1861.

140) For Pownall see Parry Jones, Op Cit, p.83; For Monro, see PRO/C211/30, entry in Middlesex patients. Also PRO/J103/2, Chancery Dockets, entry June 1855; Langworthy, MH50/3, 3 May 1848; Dr Wood, see Morison Diaries, 1 Oct 1849; Wood's sister Lady Ellis was treated by Morison because she believed she was losing her mind, Morison Diaries, 20 Jan 1843, 17 Feb 1843 and 5 Mar 1843;

141) MH50/5, 26 Nov 1851; MH50/3, 11 Jan 1849; MH50/4, 21 Feb 1850; MH50/5, 15 May 1851.

142) LC 13th AR, pp.77-85.

143) PP 1859 1st Sess III, p.22 for Shaftesbury's evidence: 'from the moment a patient is struck by this affliction of Providence, from that hour he becomes, civilly and morally, dead in respect to his relatives.'

144) All single patients had to be certified except those who were cared for by their relatives on a non profit making basis and those who came under Chancery, 8 & 9 Vict c.100, s.XC.

145) 9 Geo IV c.41, XL.

146) 2 & 3 Will IV c.107, s.XLVII.

147) 8 & 9 Vict c.100, s.XC.

148) MH50/1, 15 Aug 1845; MH51/236, Circulars No.3 and 5.

149) For evidence of these see MH50/41, Minutes of the Private Committee, passim.

150) These figures are based on a detailed analysis of Chancery Bonds 1817-1860 contained in PRO/J103/1-3. From 1817 to 1840, there were 823 patients registered. Between 1840 and 1855, 634 patients, and 1855 to 1860, a further 398. (1855 patients in total)

The presentation below has been dictated by the way in which the Bonds were recorded.

	In Asylums	At Home or in Lodgings
1817-36	43.4%	56.6%
1836-45	42.0%	58.0%
1845-60	49.6%	51.4%

Of those in lodgings much higher percentages were not living with their committees. In the period 1845-60, there were 932 Chancery patients registered, 463 (49.6%) were in asylums. Amongst those in lodgings (469), 132 (28.1%) were living with their committee or one of their sureties, and 337 (71.8%) were not.

151) Anon, Familiar Views of Lunacy and Lunatic Life p.80.

152) Millar, Hints on Insanity p.64; Webster, Observations on the Admission of Medical Pupils to the Wards of Bethlem pp.11-12; Morison Diaries, 18 Jul 1846.

153) Costello, A Letter to Lord Ashley p.5.

154) Perceval, Narrative of the Treatment Experienced by a Gentleman p.XVIII; PP 1859 Sess 2 VII, p.43.

155) Leicester CRO, Halford Papers, DG24/793/3 for discussion of the care of Lady Westmoreland; DG24/905/1-4, for care of Lord Dudley; DG24/862/34 care of Lady B.

156) Seymour, Thoughts on the Treatment of Several Severe Diseases Vol 1, p.216.

157) Peel MSS, 40609, ff.149, 151, 208, 215, 221, 258, 259, 268, 277, 279 and 314. Correspondence relating to William Yates Peel (1789-1858).

158) J.M.Sc. Vol 2, No.15, Bucknill article on the LC 9th Ar.

159 Burrows, Cursory Remarks on a Bill pp.41, 61, 62 and 82.

160) Conolly, Treatment of the Insane Without Mechanical Restraints pp.327-28. Conolly talked of these attendants demanding preposterous extras; Morison Diaries, 21 Apr 1842.

161) MH50/9, 21 Apr 1858. It was Lutwidge who first brought this to the attention of the Board.

162) PP 1859 1st Sess, p.42. Shaftesbury claimed in 1859 that some great physicians controlled up to 40 houses in this way. Morison supervised lodgings in Canterbury, Farkey, Gravesend, Maidstone, Plaistow, Sevenoaks and Tonbridge, and many in London. He would also obtain patients for doctors and clergymen, and others to care for at home, most of whom were not registered; Morison obtained work for Dr Oxley of London House, Dr Steward before he became proprietor of Southall Park, Dr Daniel of Southall Park and Daniel's mother, Morison Diaries, 21 Nov 1844, 7 May 1843, 23 Apr 1846.

163) Evidence has been found for patients at Nos.2, 8, 11, 14, 30 and 42. See PRO/J103/2, for reference to Nos.8 and 14; MH50/9, 28 Jul 1858 for No.42; MH50/41, Private Committee Minutes, 7 Nov 1845 for No.30.

164) See PRO/J103/2, entries for 15 Jul 1857 Thomas Beck, 12 Jan 1856 Susannah Morgan, 20 Jul 1855 John Robson, 4 May 1835 Ann Murcot.

165) He also made use of two porters and a porter's wife from Bethlem, ex-laundry maids from both Bethlem and Surrey County Asylum, and even an ex-patient from Bethlem. Morison Diaries, 18 Oct 1845, 4 Oct 1848, 14 Oct 1848, 16 Nov 1845 and 9 Sep 1846.

166) Pauper patients in single lodgings received out-door relief and were therefore recorded. In 1860 there were 38,058 lunatics recorded in all, 32,993 paupers and 5065 private. Clearly the % figure of pauper lunatics in private lodgings was reduced by the large numbers in workhouse care, which would not have been true for the figures for private patients. This suggests therefore that the figure for private patients was higher than 916.

167) Morison Diaries, 2 Apr 1846, 10 May 1846; see also 17 Oct 1841 Eliza Hooker got 12 to 15 shillings; 31 Oct 1845 Eliza Woolcot, an ex-Surrey County Asylum nurse got 16 shillings p.w. at Mr Dickson's lodgings.

168) Lancet 1847, Vol 1, p.82, 23 Jan 1847, Wakley asserted that they sent a keeper, 'to take the onerous and laborious charge,' of a patient, then wrested his wages from him. Wakley had a special interest in this subject because his nephew suffered from mental illness and was a patient at Southall Park, Morison Diaries, 24 Apr 1849; PP 1859 1st Sess III, p.39.

169) Lancet Vol 2, 1852, p.13, 3 Jul 1852.

170) Burrows, Cursory Remarks pp.62 and 82. The anonymous author of Familiar Views of Lunacy p.61, confirmed this and claimed that many females in private nursing were, 'showy, dressy, good looking women, who rapidly took the opportunity of bettering themselves if their anomalous, half and half position in a family afforded a chance.'

171) It was still possible though. The very first applicant for a licence under the Board's new questionnaire system was C Dean. He turned out, after having been given a licence, to have been an ex-attendant from Cowper House, where he had stolen clothing from the patients. See MH50/2, 3 Feb 1847, 11 Feb 1847, 18 Feb 1847, 13 Aug 1847, 19 Aug 1847, 26 Aug 1847, 30 Sep 1847, 4 Nov 1847 and 24 Feb 1848.

172) See LC 7th AR, 1852-53, pp.30-32. The Commission prosecuted another Bethlem attendant set up in this way by Morison.

173) Morison Diaries, 13 Sep 1846; Horne got £6 p.w. in all, also giving 1 guinea a month to Mr Tobias Brown a surgeon from Camberwell. For entries in medical journal see Morison Diaries, 7 Jan 1848, 16 Mar 1849, 27 Apr 1849, 27 Jun 1849 and 20 Jul 1849.

174) Morison Diaries, 21 Sep 1842, 17 Dec 1843, 31 Jul 1844.

175) Morison Diaries, 13 Sep 1846, 27 Oct 1849; Medical Directory 1848, Part 2, p.28 of advertisements.

176) MH50/11, 31 Oct 1860 and 13 Dec 1860.

- 177) Morison Diaries, entry for 20 Dec 1849, for Monro having to withdraw the first attendant he had supplied for the care of Lord Audley, the man having proved a drunkard.
- 178) The official minimum visitation was once every two weeks, see 8 & 9 Vict c.100, s.XC.
- 179) LC Further Report (1847), p.27.
- 180) PRO/MH50/41, the Minute Book of the Private Committee, 25 Sep 1845. The Board informed Samuel Newington of Goudhurst that he did not require an official casebook to record his single patient.
- 181) PP 1859 1st Sess III, p.34-35.
- 182) 16 & 17 Vict c.76, ss.XIV, XIX and XXIII. Section XVI, also required an annual report to be made to the Commission in January on each single patient and allowed them to call for additional reports at any other time.
- 183) LC 14th AR, 1860, p.68.
- 184) MH50/9, 14 Apr 1858.
- 185) MH50/10, 19 Jan 1859.
- 186) MH51/236, Circular No.77; MH50/10, 4 Jan 1860.
- 187) See footnote 157 for Winslow's care of William Peel; MH50/9, 25 Nov 1857, 2 Dec 1857; see 16 & 17 Vict c.96, s.XII for illegality of Winslow's certificate, and of his agent Mr George being landlord of the lodgings.
- 188) See Winslow, An Act for the Regulation of the Care and Treatment of Lunatics, with Explanatory Notes and Comments; MPA Minute Book, Report of the 1856 Meeting at Derby; Winslow was not alone in making arrangements like this. In 1858 A J Sutherland appointed Dr Blandford Resident MD of his two asylums, Blacklands and Otto, and also superintending officer to Alpha Road Cottages.
- 189) MH50/9, 27 Aug 1858, 11 Aug 1858, 31 Aug 1858; MH50/10, 27 Oct 1858.
- 190) see MH19/169, Poor Law correspondence with the LC, Gaskell's report on single lunatics in Carmarthen and Cardigan, 16 Jul 1860; Also further report, 21 Dec 1860.
- 191) The Reverend Howard whom Morison placed with an ex-Hanwell magistrate, Mr Trimmer, was under restraint almost continuously for eight years until moved to Ticehurst Asylum. In 1842 Morison recorded another patient as, 'still requiring restraint, although nearly reduced to skeleton and his back excoriated with sores,' Morison Diaries, 11 Nov 1842; Admiral Mangin's son was cared for by Morison's son-in-law John Nicoll. In 1846 Morison reported George Mangin had got the better of Nicoll, 'and given him a good beating.' Morison Diaries, 12 Feb 1846.. See Appendix G.

192) Morison Diaries, 10 Oct 1840, many of Morison's private patients also had their heads shaven.

193) Scull, Museums of Madness pp.201-04; McCandless, 'Liberty and Lunacy: The Victorians and Wrongful Confinement,' in Scull (ed) Madhouses, Mad Doctors and Madmen;

194) MH50/41, 30 Sep 1845. This lady was rational in conversation, but it was stated that if she was allowed to be at large, she would, 'disgrace her family.'

195) These figures are extracted from the Commission's minutes.

196) Herts CRO, Lytton MSS, DE/K/C23/16, Forster to Lytton, 11 Oct 1857.

197) Finer, in Harris (ed), British Government Inspection pp.VIII-IX.

198) Forster MSS, Procter to Forster, 29 Mar 1862, Procter remarked that Gordon wanted more uniformity in the reports of Commissioners visiting licensed houses; See also, May 1856, Procter's comment, 'The Report is very bad - no sequence - no unity - trivial matters are introduced that ought not to be laid before Parliament. Repetitious (about the Secretary of State's sanction especially) and verbatim copy of reports which ought to be digested and the result only given.'

199) MH50/10, 2 Feb 1859.

200) A similar office was created some years later in Connecticut in connection with the Hartford Retreat and its pauper inmates.

201) This information is extracted from Deutch, The Mentally Ill in America pp.254-57.

202) This arrangement had existed since 1787.

203) An example of its beleaguered state, was that the Commissioners in Dublin received 7,000 registered letters a year. Compared to the Scottish and English Commissioners, it also had a worse ratio of staff to the population it served: Ireland 1 : 4,000,000; Scotland 1 : 1,400,000; England 1 : 3,000,000. If Shaftesbury and Gordon are counted as two further Commissioners this becomes 1 : 2,250,000. With the Secretary it becomes 1 : 2,000,000. In Scotland there were also 2 Assistant Inspectors.

204) For requests for advice see: HO34/10B, 1 Jul 1851, Grey asked their opinion on the Rules to be adopted for Grenada Asylum; MH50/7, 22 Aug 1854, M Vandamme, President of the Inspectors of Belgian Asylums, requests information about practice in English asylums; MH50/7, 19 Oct 1854, letter from Dr Jarvis of Massachusetts on behalf of the Commissioners of Lunacy in Massachusetts asking advice and information.

For sending prospectuses and information see, HO34/8, 6 Dec 1847, despatch from the Grand Duchy of Baden; HO34/8, 13 Feb 1849 report on lunatic asylums in the Netherlands forwarded by the Dutch Minister at Court.

For requests for observers to tour asylums see, HO34/7, 7 May 1847 Grey asked the Commission to name the best asylums for Dr Stabb from Newfoundland to see; HO34/9, 12 Oct 1850, Baron Keller wrote on behalf of the Austrian Government asking for facilities for Messrs Beer and Lang to visit establishments on a list sent and to obtain certain publications;

205) Scottish Commissioners received between £1,000 and £1,200, and their Assistant Inspectors got £500.

206) HO34/8, 12 Dec 1848, HO to LC.

207) When Campbell and Gaskell sat on a similar body to investigate Scottish asylums it created a lot of local resentment, see Wynter, article in the North British Review Vol 27, 1857, pp.106-126; For Hatchell see, MH50/8, 3 Dec 1856. In reply to Hatchell the Board said it could not give him a blanket testimonial, but that if asked for references, individual Commissioners who knew him well would give their high opinion of him.

208) For discussion of this case see, PRO/CO127/359, CO137/343, CO137/348 for Taylor's docket, CO137/347 Shaftesbury to Lytton, 14 May 1859, and other correspondence. The lax approach of the Colonial Office to this problem can be judged by the fact that it had received complaint about this asylum in 1842, see CO137/266, A E Robbins letter from Jamaica to Lord Stanley, Secretary for the Colonies, 16 Dec 1842. Nothing had been done however.

209) MH50/2, 16 Apr 1847. The Clerk of Bedford offered his accounts system; also entries in the Commission's Minutes dated, 5 Nov 1852, 21 Mar 1853, 6 Jul 1853, 28 Mar 1855, 18 Jul 1855, 4 Feb 1858, 16 Dec 1858 and 23 Feb 1859.

210) MH50/1, 14 Aug 1845.

211) Shaftesbury MSS, Cranborne St Giles, Annotated Notes for evidence he gave before the 1877 Select Committee.

212) LC 7th AR, 1852-53, p.46

213) LC 8th AR, 1854, pp.37-41. For more detailed discussion of Luxmore case see, HO45/OS/3813.

214) MH50/10, 4 May 1859.

215) For Henry Baker see MH50/5, 17 Jun 1852. The Board expressly wanted the case presented as one calling for punishment as a warning to other offenders. However Baker was convicted but not sentenced.

216) MH50/9, 4 Aug 1858.

217) For a full account see HO45/OS/5153.

218) For a prosecution that caused embarrassment see chapter 6 for discussion of the Snape case; For Peckham case see LC 6th AR, 1851, pp.17-18.

219) Medical Circular 15 Jun 1864, p.398.

220) Medical Times Vol 2, 17 May 1851, p.537.

221) MH50/10, 6 Jul 1859.

222) Scull's section on the Asylum's Critics, is one of the least convincing in his book. It is based almost solely on Conolly's book The Indications of Insanity written by a man with no practical experience of managing the insane at that time. Although he is correct that Conolly felt there were many patients in asylums who should not be there, the latter still identified asylums as the basic unit around which a system of community care could be established, see pp.481-96.

223) For a more modern critique of community care see Scull, Decarceration.

224) H045/OS/3511.

FOOTNOTES - CHAPTER 5

- 1) A more serious attempt at reform was made by Dickens, when he addressed the newly formed *Society for Administrative Reform* in June 1855,. In his speech he referred to a motion which Layard had brought in the Commons expressing concern at patronage and blind adherence to routine which were blighting the civil service and bringing discredit on the Nation, JHC 1855, p.296.
- 2) Forster MSS, Dickens to Forster, 3 Feb 1855.
- 3) Gardiner, Life of Sir William Harcourt Vol 2, p.587.
- 4) See Appendix H, for a comprehensive list of Home Secretaries and Lord Chancellors during this period. From 1845-51 the Commission had three members sitting in the Commons, Shaftesbury, Seymour and Vernon Smith. After 1851 Shaftesbury was in the Lords. In 1852 Clifford provided another M.P. in the Commons.
- 5) Shaftesbury stressed this dual accountability in his speech introducing the legislation of 1845, suggesting at the same time that there was nothing really novel in the Acts. He also played down the financial implications of the county asylum building programme. See Hansard 3S, Vol 81, pp. 180-87 and 3S, Vol 82, pp.396-99.
- 6) See PRO/T27/145, entry for 30 Aug 1854. Also discussion in Chester, The English Administration System 1780-1870; For HO responsibility see repeated reminders for economy in the series HO34, for example, HO34/7, 23 Nov 1846, HO34/8, 2 Dec 1847, HO34/8, 9 Nov 1848, HO34/9, 10 Nov 1849, HO34/9, 12 Nov 1850, HO34/10B, 18 Nov 1851 etc.
- 7) 8 & 9 Vict c.126, ss.XXVIII and XXXI.
- 8) He could discharge patients, recommend the visitation of single patients who were not under the Court of Chancery and also order the inspection of any gaol, asylum, hospital or workhouse, 8 & 9 Vict c.100, ss.CXII and CXIII; Pellew, The Home Office 1848-1914 makes no mention at all of the HO responsibility for criminal lunatics and county asylums.
- 9) HO34/6, p.463, Graham to LC, 25 Mar 1846, thanking the Commissioners for their well considered report and for the trouble they had taken in getting information for him; In Nov 1845 Graham wrote in reply to Lord Lyttleton that it was, 'quite unusual for the Secretary of State to give opinions as to the construction of Acts of Parliament.' He then asked the Commission for information that he could forward to Lyttleton, HO44/70, HO to LC, 21 Nov 1845.
- 10) PRO/HO43/71, 6 Mar 1846, HO to LC. The following June he recommended that the Board, and not himself should inform the Salop Visitors that they could not have permission to buy land; PRO/HO34/7, 22 Jun 1846, HO to LC.
- 11) MH50/1, 23 Jul 1846. In July Lutwidge met S M Phillips, Under Secretary at the HO and it was agreed that the decision to withhold.

approval from Derby County Asylum's plans, would be communicated to the Visitors by the LC.

12) For Graham see, Hansard 3S, Vol 76, pp.1264; For Grey, see discussion in Finlayson, The Seventh Earl pp.285-90, 294 and 299.

13) PRO/FO27/808, 27 May 1848, 22 May 1848; FO27/799, 18 Jul 1848; FO146/372, 29 Oct 1849.

14) HO34/7, 13 Jun 1846.

15) For Grey's support in Parliament see, Morning Post, 27 August 1846 and Morning Herald 27 Aug 1846; For Grey's follow up see, HO34/7, 2 Sep 1846.

16) Scull, Museums of Madness p.197.

17) HO34/7, 25 Jul 1846 and 7 Jan 1857; MH50/8, 3 Dec 1856 for Grey's mediation.

18) HO45/OS/7873, Grey to the LC, 7 Mar 1866.

19) Bath City Record Office, MSS relative to asylums, Bundle No.9, Letter from J Stone, Town Clerk to R T Gore. Visiting Magistrate, 5 Jan 1863; It was not until 1862 that the Home Secretary finally threatened to use his compulsory powers against Bath, HO45/OS/6589.

20) HO43/37, 3 Mar 1829, HO to Bethlem, Peel asked for material reductions in the number of attendants on the criminal wings and the expense of maintenance and clothing; See chapter 6, section on Charity Hospitals for the involvement of the HO representative Mr Capper in pilfering hospital goods.

21) In fact the Metropolitan Lunacy Commissioners had complained about the need for a central criminal lunatic asylum in 1829, PP 1830 XXX 275. The LC mentioned this in their Annual Reports of 1849, 1850, 1852, 1854 and 1856. In 1852 the Commission asked Shaftesbury to bring the issue to the attention of the Lords.

22) MH50/3, 26 Mar 1849; London School of Economics, Jebb MSS, Box 8, W C Finch to Jebb, n.d.

23) By 1852 numbers at Fisherton had gone up to 59, and this had become 250, by the time Broadmoor opened. In 1855 the Commission discovered that Finch had agreed with the HO to make Fisherton exclusively for criminal patients, 500 in all, to be maintained at the government's expense. It successfully opposed this stating, that licensed houses were not under HO control, and great inconvenience would arise if the house was mismanaged and had its licence withdrawn. MH50/6, 13 Jun 1855. The same year Finch tried to buy Grove Place Nursling which was being sold by the bankrupt Mr Potheary. In the early 1860s Finch tried again to get government custom by writing to Jebb to suggest that as he had selected Fisherton in 1849 to house criminals, perhaps he could sanction their retention there after Broadmoor opened, as there would be a huge influx to Broadmoor from other asylums. As he pointed out Broadmoor was built for 500, but there were 800 criminal lunatics registered already at this time, Jebb MSS, Box 8.

24) In 1858 for example Nairne was refused entry to Hertford Gaol twice, MH50/9, 20 Jan 1858 and 26 Jan 1858. The governor only finally admitted Commissioners after being threatened with an order of mandamus.

25) For further discussion of this issue see Smith, Trial by Medicine pp.21-22. Shaftesbury was dubious about the value of medical testimony in criminal trials, and the Commission was embarrassed by abuse of the insanity defence which prevented the law taking its course.

26) In Feb 1849 Thomas Cross, a murderer, escaped from Camberwell House and returned to Derby, the scene of his crime. MH50/3, 5 Feb 1849, 15 Feb 1849, 23 Feb 1849 and 8 Mar 1849; At Gateshead Fell one criminal escaped four times over the same period, and another at Hoxton went missing six times in as many months; Shaftesbury also suggested that this class was the most likely to band together and cause trouble in an asylum, LC 5th AR, 1850; See also Hansard 3S, Vol 119, 18 Mar 1852, pp. 1230-44, Shaftesbury's evidence to the Lords on criminal lunatics.

27) LC 7th AR, App D. This speech was based on information which the Commission asked proprietors and superintendents to forward about the placement of criminal lunatics in their asylums and any problems related thereto.

28) Hansard 3S, Vol 119, 18 Mar 1852, pp.1230-44. That same year the J.P.s of Somerset and Leicester both petitioned the House of Lords asking for a central criminal asylum, JHL, LXXXIV, pp.8 and 55.

29) MH51/48. In 1853 with 112 criminal patients out of a total of 343, this class constituted 32.6% of all patients in Bethlem. By 1862, this had risen to 41.2%.

30) MH50/6, 19 Jan 1853; MH50/8, 30 Nov 1855.

31) MH51/49. File on Broadmoor.

32) PP 1859 1st Sess III, pp.271-73. There were five categories of criminal lunatic 1) those committed for trial who then went insane, and were never taken to court 2) those who were sane at the time of trial, were tried and acquitted of felonies/misdemeanours on the grounds of insanity 3) convicts who became insane whilst in prison or on the hulks 4) those found insane on arraignment or trial 5) the deranged who were considered at risk of committing an offence.

33) MH51/49, LC to HO, 21 May 1860. Compare LC's suggestions here with the Bill. The LC proposed that the Home Secretary should not appoint all officers as the bill intended, this however remained in. It recommended that the superintendent be empowered to grant liberal superannuation allowances to nurses after 15 years service, but the Act left the power of fixing salaries and pensions with the Home Secretary. Lewis also refused to extend to the Commission, the clause which stipulated that the Council of Management should forward an Annual Report to hi,.

34) MH51/49, 29 Mar 1862, Memorandum by Jebb.

- 35) MH51/49, 9 May 1862, LC to HO. It may well have been Jebb's influence with Waddington the Under Secretary, which had indirectly caused this trouble. For evidence of this influence see, Brougham MSS, 24545, Forster to Brougham, 10 Jan 1863.
- 36) MH51/49, 7 Aug 1861. Final report of the sub-committee.
- 37) LC 14th AR, 1860, pp.101-04.
- 38) HO45/OS/4553, see docket on letter dated 18 Aug 1853.
- 39) HO45/OS/7269, Saumarez to Grey, 16 May 1862 for the suggestion that the 1859 Select Committee was 'packed.'
- 40) HO45/OS/1590 and HO45/OS/1864. For further description see, Lock, Tales from Bow Street pp.98-99.
- 41) MH50/2, 19 Aug 1847 and 24 Feb 1848. Also HO45/OS/3814.
- 42) PRO/LCO/1/64, Lord Shaftesbury to Lord Selbourne, 16 Jan 1885.
- 43) These committees had to pay a bond, calculated on the estate, as a recognisance of good behaviour. Analysis of these suggests that many estates were gradually reduced in value. (PRO/J103/1, 2, and 3.)
- 44) The LC made a number of attempts to obtain a reduction in the cost of placing a patient's property under protection, including ss.95,96,97 and 98 of the Care and Treatment of Lunatics Act 1845. See LC 6th AR, 1851, for the suggestion that further legislation was needed. The 1853 Lunacy Regulation Act (16 &17 Vict c.70) did effect some reduction in costs. There was a greater take up of Chancery proceedings after 1845. By 1859 only 3 out of 70 cases a year, still had a jury hearing. PP 1859 1st Sess III, p.102 evidence of C N Wilde.
- 45) PP 1859 1st Sess III, pp.99-127.
- 46) PRO30/51/9, Lord Cairns' Correspondence, Lord Chelmsford to Lord Cairns, 13 Feb 1859.
- 47) PP 1860 XXII, 349, p.35.
- 48) For discussion of the abuses in Chancery see, Saumarez, An Address on the Laws of Lunacy for the Consideration of the Legislature pp.4-16.
- 49) The evidence of their old colleague, from the Metropolitan Lunacy Commission, H H Southey, did not inspire confidence either. He intimated that the Medical Visitors in Lunacy were afforded a less powerful role within the Lord Chancellor's Board, than that of Barlow and Winslow, the Masters in Lunacy or even of the Lord Chancellor's Registrar of Lunatics who acted as Chairman of that Board. PP 1859 1st Sess III, p.130.
- 50) PRO/LCO9/1, Masters Minutes 1856-64, 1 Aug 1856 and 22 Jan 1857.
- 51) PRO30/51/8, Shaftesbury to Cairns, 11 Jan 1879.

52) Glamorgan CRO, Lyndhurst Papers, D/D LY 25/20, Shaftesbury to Lady Lyndhurst, 26 Jul 1871. Lyndhurst had tentatively mentioned one doctor, but withdrew his name immediately when told the man was inexperienced.

53) SHA/PD/4, 11 Dec 1845. In 1855, as we saw in chapter 3, Cranworth abandoned his choice for Secretary in favour of Forster. Cranworth also appointed Wilkes, almost certainly at Shaftesbury's instigation.

54) Shaftesbury MSS, Cranborne St Giles, Uncat. MSS., Shaftesbury to Lord Cairns, 18 Nov 1875. The same year, Nairne wrote to the President of the Royal College of Physicians expressing his hope that Sheppard would not be elected a fellow, as this would lend weight to his opinions. (RCP File on Misconduct Cases labelled Lunacy).

55) For discussion of this incident see, LCO/1/64 and 65. Also MH51/721, Shaftesbury Misc Correspondence, letters dated 13 Mar and 17 Mar 1885; Also Hodder, The Life and Work of the 7th Earl of Shaftesbury Vol III, pp.503-4.

56) Westbury was virulently opposed to complicated medical testimony in lunacy cases. See B.M.J. Vol 2, 1862, p.258; For an example of a similar process at the Home Office see the role of Grey and Walpole as members of the Select Committee on Lunatics in 1859.

57) Too much should not be made of this, as the Law Officers were notoriously cautious in their recommendations, see Roberts, Victorian Origins of the British Welfare State, pp.299-302.

58) HO34/8, 3 Nov 1847; HO34/8, 27 Jun 1848; HO34/9, 14 Feb 1850.

59) See the LC's 3rd, 4th, 5th, 6th and 7th Annual Reports for requests for legislation; HO45/OS/2222, for the careful logging of defects in the Acts.

60) 9 & 10 Vict c.84, ss.1 and 6.

61) HO34/8, 3 Nov 1847.

62) See HO34/7, 12 Feb 1847 for the case of Samuel Fryger; HO45/OS/2285, for Mr Shadwell's case in 1848; also MH50/7, 18 Jul 1855 for wandering lunatics in Reading.

63) PRO/MEPOL3/20, Police Commissioners to HO, 25 Feb 1848.

64) HO45/OS/2222, LC to HO, 3 Jul 1848.

65) See MEPOL2/89, MEPOL3/20 and 21 for a full account of this case. MEPOL3/21, HO to Colonel Mayne, 3 Feb 1853.

66) For LC's request for an undertaking from Grey see, MH50/4, 1 Feb 1850; For Grey's promise see, HO34/9, HO to LC, 14 Feb 1850.

67) SHA/PD/6, 17 Jun 1852. See also Hansard 3S, Vol 122, pp.546, and 831-33. In his speech Shaftesbury did mention that the Home Office had been involved in the original plans for this legislation.

68) MH50/5, 4 Aug 1852.

69) MH50/6, 20 Oct 1852, 6 Nov 1852, 8 Nov 1852 and 9 Nov 1852.

70) In fact the Tory government fell in Dec 1852, but St Leonards had ensured via the outgoing Home Secretary Walpole, that the bills were already being drawn up by Walter Coulson and Mr Chapman Barker, in the hope that the Whigs would allow them to pass, Walpole MSS, St Leonards to Walpole, 23 Dec 1852, 25 Dec 1852 and n.d.

71) MH50/7, 31 Jul 1855.

72) This clause was proposed despite the fact that legislation in 1853 had provided for the forcible annexation of boroughs to counties by the Home Secretary, a measure Grey was not prepared to implement.

73) Chester, The English Administrative System, pp.342-4. For local clauses in the Act see 18 & 19 Vict c.105, s.VII which dealt with a problem in Sussex where the Recorder of Brighton wanted to be given the power to appoint two borough J.P.s to the County Asylum Visiting Committee; S.XIV related to a case in Reading; s.XVIII related to the situation at Grove Place Nursling in Hampshire.

74) See 18 & 19 Vict c.105, s.XIII, and the two preceding clauses XI and XII.

75) For discussion of Mrs Turner, Mr Ruck and Mr Leach, all of whom were declared sane by juries under the Chancery inquisition process, see Parry Jones, Trade in Lunacy p.237. Also Hammonds, Lord Shaftesbury pp.204-5. For the Commission's investigation of Mrs Turner's case see, MH50/9, 4 Aug 1858.

76) MH50/9, 21 Sep 1858, 3 Nov 1858, 20 Jan 1859.

77) MH50/10, 3 Feb 1859. Mellett remarked that initiative for evolution of the Lunacy Laws passed into the hands of the government for the first time during this period. If by this he means the Home Office took control, it is clear that the Commission still had a large part to play in the preparation of these bills. In fact the majority of lunacy legislation was drafted by the LC in conjunction with central government. See Mellett, Society, the State and Mental Illness PhD, p.168.

78) In 1860 the LC told Birmingham Borough Asylum that Sir G Cornewall Lewis 'had not favoured them with any official information' about the bills, MH50/10, 18 Jan 1860.

79) Grey however opposed the Commission over reducing the number of years required for asylum staff to obtain a superannuation pension; over the reading of Commissioner's reports on asylums publicly at Quarter Sessions; over rate-supported chartered asylums. See PP 1860 XXII Report of the Select Committee.

80) HO45/OS/7269 (1862), HO45/OS/8172 (1868) and PRO/LCO/1/64-67 (1885); LCO/1/64, C S Bagot to Chancery, 15 Feb 1885.

81) See Forster MSS, 48 E 32, Procter to Forster, 21 Jul 1862.

82) PP 1859 2nd Sess VII p.180.

83) PP 1860 XXII 349, p.27.

84) UCL Chadwick Papers, Ref.535, Chadwick to Shaftesbury, 15 Nov 1845; MH32/26, Report by W Gilbert on Lunatics, 1839; MH32/26, Report by W Gilbert on Lunatics in Devon, 1836.

85) The National Library of Wales, Lefevre Papers, letter from J G Lefevre and G C Lewis to the Home Secretary, Normanby, 23 Nov 1840, p.9.

86) HO44/32, 20 Mar 1839.

87) 8 & 9 Vict c.126, s.VIII allowed the Home Secretary if approached by the Guardians to sanction the use of a workhouse, as a county asylum. 9 & 10 Vict c.84, VI, (1846) allowed the Guardians to do the same, but they only had to get the permission of the Poor Law Commissioners, a much easier task. Under 8 & 9 Vict c.126, s.XVII the magistrates could also stipulate that a workhouse be used as a county asylum with the agreement of the Poor Law Commissioners and local Guardians.

88) Mellet, Op Cit pp.249-52. It is a pity that the Board did not consider the ingenious suggestion of the A.M.O.A.H.I. made in 1841, that s.45 of the Poor Law Amendment Act be altered, removing the word 'dangerous' from the clause banning all dangerous lunatics, idiots and persons of unsound mind from workhouses; 8 & 9 Vict c.100, s.111. for the annual visit to each workhouse.

89) Workhouse visitation was a task which took second place to much other work, see MH50/9, 14 Jul 1858 in comparison with MH50/10, 17 Nov 1858.

90) Before this the Commission had visited the larger workhouses (over 20 inmates) annually, and the rest every three years. MH50/6, 16 Feb 1854.

91) MH19, 17 May 1847.

92) LC Further Report (1847) pp.54-5.

93) MH50/1, 9 Oct 1846; MH19, 23 Dec 1847, Holtby to PLB; Also 2 Jun 1848, PLC to LC.

94) MH50/3, 1 Nov 1848; MH50/4, 21 and 28 Jun 1849 for meetings with Baines; 16 & 17 Vict c.97, s.LXVI, Lunatic paupers in the community were to be visited quarterly and a list made. The medical officer was to get 2/6 for each visit. This may well have induced some Guardians not to place patients in the community; coming on top, as it did, of outdoor relief to the patients themselves.

95) MH19/168, LC to PLB, 27 March 1858; LC to PLB, MH19/169, 31 Mar 1859; Reply of PLB to LC, 21 Apr 1859.

96) Hodgkinson, The Origins of the National Health Service pp.580-2; MH19/168, Lutwidge to Chadwick, 27 Apr 1847 and 22 Jul 1847.

- 97) LC Further Report (1847) App A, pp.254-55; MH19/168, Lutwidge to Chadwick, 22 Jul 1847; PLB to LC, 2 Jun 1848.
- 98) MH19/168, 2 Jun 1848. The Articles concerned were 207, No.4; 208, Nos.14 and 27; 210, No.15.
- 99) MH19/168, LC to PLB, 23 Mar 1848; LC Further Report (1847) App A, pp.285-88.
- 100) MH19/168, PLB to LC, 2 Jun 1848; MH19/168, LC to PLB, 14 Feb 1857 and reply 20 Feb 1857.
- 101) Forster MSS, 48 E 32, Procter to Forster 2 May 1857 and 1 Nov 1858.
- 102) These included: the attachment of a medical inspector to the PLB to report on the condition of those treated under its aegis; the automatic attention of a Union MO for women in their first childbirth without needing the order of a Guardian; in cases of abortion a second doctor should be called in and paid for his services.
- 103) LC Supplement to the 12th AR, 1858, pp.37-38. The Commission was in favour of local magistrates being given powers to visit workhouses.
- 104) MH19/169, LC to PLB, 3 May 1859, enclosing its Supplement to the 12th AR.
- 105) MH19/169, 21 Jun 1859, Internal Memorandum; LC Supplement to the 12th AR, pp.8-10.
- 106) MH19/169, 2 Feb 1860, Forster to PLB.
- 107) MH19/169, LC to PLB, 2 Feb 1860, see dockets.
- 108) MH32/62, Contained in a letter from the Assistant Poor Law Inspector Pigott to the PLB, 11 May 1859.
- 109) HO45/OS/7269, LC to HO, 19 Jun 1862; HO45/OS/7269, PLB to LC, 31 May 1862.
- 110) Amongst the ideas rejected at this time were 1) that the numbers to be admitted to workhouse lunacy wards should be fixed by the LC. 2) that the latter should have plans for all prospective wards forwarded to it. 3) that wards should be registered by the PLB and memorials of the registration be forwarded to the LC. 4) that Lunacy Commissioners should have the power to remove patients to asylums. 5) that all workhouse books should be produced to visiting Commissioners. 6) that the Commission should be allowed to regulate the dietaries of workhouse lunacy wards. 7) that details of the patient's medical treatment be made available to the Commission.
- 111) See MH51/749, for the Law Officers opinion about Birmingham and Nottingham which avoided the law; see Forster MSS, 48 E 32, Procter to Forster, 27 Jul 1863 for Clifford's secret workhouse clause in the 1863 bill.

- 112) For an account of Treasurys role see, Wright, Treasury Control of the Civil Service which deals with Treasury's involvement with the 'establishments' of other departments.
- 113) MH50/3, 3 May 1848 and 29 Jun 1848.
- 114) PRO/T/27/143, 10 Jun 1848.
- 115) Forster MSS, 48 E 32, Procter to Forster, May 1856 n.d.
- 116) Forster MSS, Procter to Forster, 22 Apr 1861, Procter characterised himself as the 'geographer' and explained a much more economical route.
- 117) MH50/2, 11 Feb 1847. A Board Minute recorded that a weekly account of disbursements be kept, with all the accompanying vouchers; MH50/5, 3 Dec 1851, all matters referred to individual Commissioners were hung up in the Board Room to avoid confusion over who had undertaken to complete which pieces of work.
- 118) T27/142, 31 Jul 1846; It would appear from the sums dispensed that witnesses were paid according to their rank in life, although it is unclear if this was related to actual earning capacity.
- 119) This Society will be referred to as the ALFS below. For a full account of it see, Hervey, 'Advocacy or Folly: The Alleged Lunatics' Friend Society 1845-63' in Medical History 1986, 30, pp.245-275. A copy of this can be found in a folder accompanying this volume.
- 120) This is referred to as the A.M.O.A.H.I. hereafter.
- 121) In America, the *Association of Medical Superintendents of American Institutions for the Insane* was founded in 1844, and became the *American Medico Psychological Association* in 1893; In France the first such body was the *Societe Medico-Psychologique* founded in 1847; In Germany alienists first formed an Association in 1847 as a section of the *Association of Naturalists*, but finally formed their own organisation in 1865.
- 122) Royal College of Psychologists, Minute Book of the MPA, 1841-92, entry for 19 June 1841.
- 123) MPA Minute Book, p.49, 17 Jul 1851; p.17, 1 Jun 1843; J.M.Sc. Vol 1, 1853, Editorial by Bucknill.
- 124) MPA Minute Book, Report of Meeting on 22 Jun 1854; The different criteria were that MOs of public asylums and hospitals could join the Association merely by giving the Secretary notice of their wish to do so. Proprietors of private asylums were required to be elected at a full meeting of the Association.
- 125) Dr T O Prichard joined Dr Campbell (Essex County Asylum).
- 126) MPA Minute Book, Report of the Annual Meeting 1 Aug 1856; See Medical Circular Vol 2, No.41, 13 Apr 1853, Henry Monro, A J Sutherland, Nairne, F Philp and J B Daniel were in the deputation.

127) MPA Minute Book, 1 Jun 1843. Annual Meeting 1 Aug 1856; 3rd Annual Meeting, 1 Jun 1843.

128) MPA Minute Book, 22 Jun 1854.

129) MPA Minute Book, 17 Jul 1851. J Conolly, Bucknill, Hitch, Nesbitt, Boyd, Corsellis and Diamond made up the rest of the Committee.

130) This committee contained Winslow, Sutherland and Conolly from the private sector, Bucknill and Lockhart Robertson from the public, MPA Minute Book, 1 Aug 1856.

131) J.M.Sc. Vol 5, No. 27, p.78. This group contained Bucknill, Lockhart Robertson, Stevens and Campbell from public asylums, Conolly, Winslow and Wood from the private.

132) These clauses were from the bill, PP 1859 1st Sess, II, 177, ss.IV, XIII, XXVI and XV.

133) J.M.Sc. Vol 5, No.29, pp.375-410.

134) The predominant role of private practitioners within the Association at this time is reflected in the Presidency: Winslow 1858, Conolly 1859 and Sir C Hastings 1860.

135) The Medical Circular was owned by James Yearsley, a close friend of F B Winslow. Winslow had helped him found the Medical Directory as well, but had pulled out of it, after some initial financial losses. Both were friendly with J S Bushnan, owner of the Medical Times, and proprietor of Laverstock House, Wiltshire.

136) See Medical Times Vol 16, No.415, 11 Sep 1847, pp.573-4; Medical Circular Vol 5, 2 Aug and 16 Aug 1854.

137) 16 & 17 Vict c.97, s.LV.

138) MH50/9, 23 Sep 1857 and 9 Jun 1858; MH51/751; MH50/9, 22 Jul 1858.

139) This Association was extremely polemical, and was led by Louisa Lowe, a vicar's wife, who had been incarcerated by her husband because of her spiritualism. She had left him and claimed he was trying to get hold of her property. Founded in 1873 it died out around 1885.

140) This Society started life as the National Council for Lunacy Reform, and was founded following two private conferences on the issue of lunacy reform held at the Minerva Cafe on 29 Apr and 19 May 1920. Its objects were: to promote research into the causes of mental instability; to investigate the present system of care and treatment, and its results ; to secure the provision of hostels for early cases; to safeguard the liberty of the subject; to reduce the burden of ever-increasing asylum expenditure; and to educate public opinion on the subject of mental disorder. It was clearly influential in securing a Royal Commission in 1926, and was disappointed by subsequent legislation in 1929. It had branch organizations outside London, and included two members who wrote

books on the asylum system, J E Parley and Dr M Lomax. (There are three minute books for this Society held at the offices of MIND in London.

141) Jones, Mental Health and Social Policy p.35.

142) Parry Jones, Trade in Lunacy pp.89-98.

143) See footnote 75 above; also McCandless, 'Liberty and Lunacy' in Scull (ed), Madhouses, Mad Doctors and Madmen passim.

144) Hunter and Macalpine, 'John Thomas Perceval (1803-76), patient and reformer,' in Medical History Vol 6, (1962), pp.22-26. Perceval was author of, A Narrative of the Treatment experienced by a Gentleman during a State of Mental Derangement 2 Vols; Also of Letters to Sir J Graham upon the reform of the Law. See bibliography.

145) For an account of William Bailey, see his petition to the Commons, HC Supplement to the Votes 1845, Vol 2, pp.1144-45. Also Perceval, Letters to Sir J Graham, letter concerning a Mr B[ailley]. Bailey was also an overseer in the parish of St Giles-in-the-Fields and as such was involved in care of the pauper insane; Richard Saumarez. 1791-1866. (Son of Richard 1746-1835, the surgeon and prolific polemical writer on medical education and the duties of medical corporations.) Town Councillor at Bath; Guardian of St Luke's Chelsea; FRS. Author: An Address on the Laws of Lunacy and The Laws of Lunacy and their Crimes.

146) HO44/49, Perceval to Normanby, 5 Apr 1840; British Museum, Add.MSS, Peel, 40426, f.243, Perceval to Peel, 8 May 1839; and 40523, f.397, Saumarez to Peel, 26 Jan 1843. IN 1839, there were petitions from Perceval, Saumarez, and the parish of St Luke's Chelsea. Perceval and Bailey petitioned in 1842, and in 1845 there were 17 petitions inspired by this group.

147) Thomas Wakley (1795-1862) MRCS 1823. Founded the Lancet in 1823. MP Finsbury 1823-62. Middlesex Coroner 1839-62.

148) In 1859, Perceval stated that the foundation of the Society was chiefly due to Mr Luke Hansard. An examination of the Hansard Papers suggests that Luke may have had a daughter or daughter-in-law called Mary Ann who was mentally disturbed and boarded with a Mrs Aveling. (Hansard papers, Southampton University Library, Accts and MSS, LF 780 Uni/103) The information about the ALFS's aims is taken from a pamphlet dated 1846. Several sources including Jones (note 141 above) quote the Society as producing pamphlets in 1851 and 1858. Pamphlets for 1846 and 1849 have also been found to date. These and the pamphlet dated 1851 are to be found in the Forster MSS, V and A Museum.

149) Perceval, Letters to Sir J Graham, letter dated Jun 1844. Perceval wrote, 'for my own part I do not approve of Commissions of this kind for the ordinary administration of the laws of this country, more particularly where they interfere with the ordinary channels of government.'

150) HO45/OS/7102 Perceval to George Clive, 2 May 1861, appeal to Magne Carta and the universal meaning of laws as found in Montesquieu. For comparison, see the petition of William Morgan to the House of Lords in 1847 (JHL, LXXXIX, 1847, p.159). See also, Lubenow, The Politics of Government Growth passim.

151) Perceval, Letters to Sir J Graham, 1 Aug 1845; Cf. Foucault, Madness and Civilization pp.241-278.

152) ALFS 1st Report, Origins, Progress, and Expenditure of the Society pp.1-4.

153) For removal from home see, Seymour, Thoughts on the Nature and Treatment of Several Severe Diseases pp.170-220. Seymour opposed this, but made it clear it was axiomatic amongst his contemporaries. For discussion see Scull, Museums of Madness pp.90-102. Perceval, Letters to Sir J Graham pp.XVIII.

154) See Walker, Crime and Insanity in England chapter 2; Smith, Trial by Medicine pp.70-74, for discussion of the exemption of madmen from the consequences of the criminal law, which was linked to the age of discretion in children.

155) In 1859 Perceval suggested that lunatics were rarely given the chance to exercise their will or judgment, which had a detrimental effect in impeding their recovery, PP 1859 Sess 2, VII, p.20.

156) LC 6th AR, pp.17-18. The prosecution of attendant Samuel Hill was completed when Lord Justice Campbell agreed to accept the evidence of a patient, Richard Donelly. Campbell argued that, 'the proper test must always be, does the lunatic understand what he is saying, and does he understand the obligation of an oath.'

157) One exception to this rule was the certification of sane persons to help them escape the rigours of the law. For a good example see HO45/OS/5521, the case of the Rev. Edmund Holmes, member of a noted county family in Norfolk, who was certified to prevent his prosecution for the attempted violation of a twelve year old girl.

158) Although the Care and Treatment of Lunatics Act laid down certain inquiries which should be made on admission, there was no equivalent of the modern mental state examination. For examples of subjectively determined symptoms, see McCandless, 'Insanity and Society: a Study of the English Lunacy Reform Movement' PhD thesis, Wisconsin, 1974, pp.166-203. HO44/31, letter from Perceval to the Home secretary, Lord Normanby, 5 Apr 1840. Perceval remarked of doctors, 'there is usually much presumption and much false reasoning, craftily blended with unquestionable truths in their statements.'

159) The Society submitted petitions in 1846, 1847, 1848, 1849 and 1852.

160) PP 1859 Sess 2, VII, p.46.

161) Duncombe and Crawford also opposed retiring pensions for Commissioners and suggested a reduction in their proposed salaries.

the language used by these men and other members of the ALFS reflects many of the preoccupations of Toulmin Smith (1816-69) the lawyer, phrenologist and localist champion.

162) Hansard 3S, LXXXII, 16 Jul 1845, pp.14-15. Also, JHC, Vol C, 2nd, 15th and 16th July 1845 for split votes.

163) Shaftesbury Diaries, SHA/PD/4, 5th, 22nd and 23rd Jul 1845.

164) Francis Offley Martin, the Charity Commissioner, made some acknowledgment, An Account of Bethlem Hospital: The Book was dedicated to Duncombe for his opposition to the exemption of Bethlem from the 1845 Act, and Martin sought to obtain the continuing support of the radical Metropolitan M.P.s to secure further reforms.

165) This was always a major objective of the Society. It had in fact been proposed in 1828, but was struck out of Gordon and Ashley's bill by the Lords.

166) 8 & 9 Vict c.100, ss.24, 45, 46, 48, 55, 56, 106 and 105. In view of the mental fragility of patients on discharge, his clause extending the time limits within which they could bring cases of illegal confinement to court was particularly useful.

167) The protection of patients' property automatically once admitted, the establishment of half-way houses with voluntary confinement, written justification for a detention by the signer of an order of admission, and increased visitation. Perceval, Letters to Sir J Graham letters V, VI and VIII.

168) Perceval, Hints for the Abolition of Private Lunatic Asylums 1853, p.4. (This document was found in HO45/OS/7102).

169) Other useful ideas included the following: that patients' property should have a seal placed on it the moment they were confined, only to be removed in their presence or an attorney's; that licences should only be granted to proprietors of integrity or celebrity in treatment of the insane, or those pioneering new advances; and that asylums where patients could reside voluntarily be established.

170) 16 & 17 Vict c.96, ss.10 and 19.

171) The Society obtained several clauses in the Scottish Lunacy Act 20 & 21 Vict c.71 (1857) through its contacts with the Lord Advocate, notably the suggestion that clergy should visit local asylums on a regular basis. Also the enactment that before an admission, the relatives should sign a statement about the case, which, together with two certificates, would go to the local sheriff, to make an order.

172) Sir William Tite 1798-1873. Architect; M.P.Bath 1855-73; FRS 1835. (See DNB).

173) As achievement: Hunter and Macalpine, Op. Cit., note 144 above. As failure: HO45/OS/7269, Saumarez to Sir G Grey, 16 May 1862.

174) HO45/OS/7269.

175) For information on the Gheel system, see J Webster, 'Notes on Belgian lunatic asylums, including the insane colony of Gheel' in J.Psy.Med. Vol 10, 1857, pp.50-78 and 209-247; Stevens, 'Insane Colony at Gheel,' in J.M.Sc. Vol 4, 1858, p.426-437; Parry Jones, 'The model of the Gheel lunatic colony and its influence on the nineteenth century asylum system in Britain' in Scull (ed) Madhouses, Mad Doctors and Madmen chapter 8.

176) The ALFS wanted compulsory detention under certificates to be complemented by the possibility of informal admission. In 1861, Dr Nesbitt, Superintendent of Northampton Hospital, wrote to Perceval criticizing the law, which ignored a person's will in the issue of confinement, enclosing a pamphlet addressed to Shaftesbury. (HO45/OS/7102) It is true that the Acts 16 & 17 Vict c.96, s.6, and 25 & 26 Vict c.11, s.18 did allow some ex-patients to be received as boarders in private asylums, but this was a very limited provision; Cf. Haynes, 'Voluntary patients in asylums' paper read at the Quarterly meeting of the MPA, 28 Oct 1869. (Forster MSS, F 37 P 23, 559, No.9.)

177) Morning Post 24 Feb 1848.

178) The only Returns asked for between 1845 and 1860 emanated from the Society. They were initiated by James Wyld in 1848, Henry Drummond in 1853 and William Tite in 1856 and 1858.

179) Lord Dudley Stuart is a good example. He took a personal interest in the subject having a son who was a patient of Drs. A Morison and E J Seymour. Stuart looked after his own son in private lodgings. (Morison Diaries, 16 and 17 May 1849) In 1848, he canvassed the Lord Advocate concerning the Scottish Lunacy Acts (Morison Diaries, 18 May 1848) In 1853, he was instrumental in obtaining an inquiry into abuses at Colney hatch, primed by the Society (HC Accounts and Papers 1852-53 (44) Vol C, pp.45-50); and in 1854, he brought up the case of the Rev E Holmes at Heigham Retreat (HO45/OS/5521).

180) Times 17 Feb 1852, p.7 and 18 Feb, p.8. James Hill brought an action against F Philp, proprietor of Kensington House, for illegal confinement. Hill was clearly disturbed, and the jury found for Philp, but it also impressed on him that he should be taking a great deal more care in the management of his asylum.

181) This figure is based solely on cases recorded in the Lunacy Commission's Minutes. There were others the ALFS handled that are not mentioned in the Commission's records.

182) For a more detailed instance of this type of criticism, see discussion in chapter 6, about the complaints made by the Bethlem Governors concerning the Commission's inquiry there in 1852.

183) The initial referral came from a couple with whom Dixon had lodged for several years, saying he was not a proper person to be confined. (MH50/3, 5 Jul 1848) At the time, the Lunacy Commission informed the Home Office that Fox had made an irregularity from a misapprehension of the law. (MH50/3, 27 Jul 1848) However during the inquiry into neighbouring Fishponds in 1848, more than 50 incorrect

certificates were found at this asylum. HO45/OS/2797, enclosed pamphlet.

184) MH50/3, 19 May, 5, 13, 20 and 27 Jul, 3, 9 and 16 Aug 1848. The case of Mr Pulverstoft an inmate at Northampton provides a similar example. The patient complained that the ALFS had approached the Lord Chancellor and Home Secretary against his wishes.

185) Hereinafter referred to as the Law Amendment Society (LAS).

186) The LAS included amongst its members the former Lords Chancellor Brougham and Lyndhurst, who had directed the Equity Committee to look at the Lunacy Laws.

187) 26 & 27 Vict c.III, The Lunatics Law Amendment Act. For further material on the arguments concerning amalgamation of the two see, LCO/1/64-67.

188) Perceval was a personal friend of the Editor of Elberfelder Zeitung, who sent him debates in the Prussian Chambers on lunacy, and whom he had visited. In 1850, the Society lobbied the American Ambassador, Mr Lawrence, seeking information. They also promoted the system used in Jersey.

189) MH50/4, 9 Aug 1849. See also HO34/9, 19 Dec 1849.

190) This was true for both Hanwell and Colney Hatch, as well as Northampton Hospital. For Colney see PP HC Accts and Papers, 1852-53, (44) Vol C, pp.45-50, and MH50/10, 1 Aug 1860.

191) MH50/8, 8 Jul - 31 Aug 1858. One of the Governors tried to discredit Perceval by arguing that his history of mental illness implied that, 'his sympathies with the insane are of a very morbid character and his judgment to the last feeble and weak.' (Northampton Herald, letter to the editor from George Robinson, 4 Sep 1858, Cf. ibid., 28 Aug 1858 for text of Perceval's lecture. A complete account can also be found in PP 1860, LVII, 959.)

192) In addition to lectures the Society also held public meetings about the lunacy acts. eg. the meeting held on 28 Mar 1848 at the British Coffee House to prepare a petition asking for a Select Committee. See advertisements in the Times, 25 and 28 Mar 1848; Also meeting on 1 Feb 1859 at Exeter Hall. See Morning Post, 3 Feb 1859; and B.M.J Vol 1, 1859, pp.116-17.

193) MH50/9, 14 Sep 1858.

194) MH50/10, 5 and 15 Oct 1858. See also MH50/13, 6 Sep 1864.

FOOTNOTES - CHAPTER 6

- 1) For an example of this see: Lewis, Edwin Chadwick. In contrast see studies which looked closely at implementation of policy: MacDonagh, A Pattern of Government Growth; Lambert, Sir John Simon; Bartrip, and Fenn, 'The Administration of Safety' in Public Administration (1980) lviii. Bartrip and Fenn demonstrate that conventional wisdom about the significance of inspection has rarely been based on a thorough reading of the evidence. They suggest also that historians had been over impressed with statutes and regulatory bodies, and have failed to establish any criteria for quantifying change.
- 2) This is not an attempt to provide a comprehensive history of care for the insane in Kent and Surrey, which would be beyond the remit of this study. There is however a brief history of each asylum in Kent and Surrey in Appendix J, and it is hoped that other material will be presented in future articles.
- 3) Smith, Government by Commissions p.39. Members of the Alleged Lunatics' Friend Society who criticised the Lunacy Commission used these ideas, describing its activities as an infringement of Magna Carta and the imposition of a new Court of Star Chamber. They wanted every patient before admission to have the ancient right of a jury hearing before his peers to determine his insanity. See Perceval, Letter to Sir James Graham. Also HO45/OS/7102 Perceval to the Home Office 2 May 1861. Also Hervey, N B, 'Advocacy or Folly' in Medical History (1986) xxx, p.253.
- 4) Mill, Principles Vol 2, 1848, p.507.
- 5) See Lubenow, The Politics of Government Growth for further discussion.
- 6) From 1835 Municipal Corporations were instructed to form efficient constabularies, but this was a major issue in local politics and different parties spent widely differing sums on policing, some not adopting the act at all. Kent also ignored the call to form a County constabulary in 1839. This was not effected until the County and Borough Police Act in 1856 made it compulsory. See Gray, Crime and Criminals in Victorian Kent. For public health see Tenterden's refusal to adopt sanitary changes, in the 1st Report of the Royal Sanitary Commission, PP 1868-69, xxxii, Qq 7487-8.
- 7) Amongst other things Justices licensed alehouses, ordered the construction of bridges, and superintended roads, public buildings and charitable institutions. For description of magisterial activities see Redlich and Hirst, The History of Local Government in England, London 1958, pp.14-17. After the creation of new local authorities by central government in 1834, the powers of the magistracy were more constricted.
- 8) 14 Geo III, c.49 Act for the Regulation of Madhouses 1774 and 9 Geo IV, c.41 Treatment of Insane Persons Act 1828; For County Asylums, 48 Geo III, c.96 County Asylums Act 1808 and 9 Geo IV, c.40 Lunatic Asylums and Pauper or Criminals Maintenance Act 1828.

9) Scull, Museums of Madness, p.197; Mellett, The Prerogatives of Asylumdom.

10) Gutchen, 'Local Government and Centralisation in Nineteenth Century England,' in Historical Journal (1961) iv; Lambert, R, 'Central and Local Relations in Mid-Victorian England' in Victorian Studies (1962) vi.

11) In 1845 for example, Kent's County Asylum Clerk asked whether the Commissioners really wanted to see all the contracts for work at the asylum, because if so he would have to accept all tenders on a temporary basis only. The Commissioners rapidly replied in the affirmative, and made regular use of this power to control the development of asylum construction.

12) KCRO, Correspondence of Lord Camden, U840/Add/C549/19, Jermyn Pratt to Camden 22 Jun 1849.

13) MH83/118 20 May 1846 and 28 Feb 1850.

14) As Pauper Lunatics were often brought up before magistrates under the Act 8 & 9 Vict, c.126, s.49. The latter were directed, with the help of a medical officer, to assess whether asylum admission was appropriate. It was easy for them to refuse this, in which case lunatics were generally placed in a workhouse. For discussion of this process see, Rogers, J, Reminiscences of a Workhouse Medical Officer, London 1889, pp.145-86.

15) MH12/5226/2284B, Dalison to the Poor Law Commission 5 Apr 1839.

16) Metropolitan Surrey included: Brixton, Battersea, Barnes, St Mary Magdalene Bermondsey, Christ Church Clapham, St Giles Camberwell, Dulwich, ST Pauls Deptford, Graveney, Kew Green, Kennington, St Mary Lambeth, Mortlake, Merton, Mitcham, St Mary Newington, Norwood, Putney, Peckham, St Mary Rotherhithe, Roehampton, Streatham, Stockwell, Tooting, Wimbledon, Wandsworth and Walworth.

Metropolitan Kent included: Blackheath, Charlton, Deptford, Greenwich, Lewisham, Lee, Southend and Woolwich.

17) See Appendix J.

18) See Tables 1-3. The section on Tables can be found at the front of the Supplementary Volume to this thesis.

19) PP 1845, I, 325, pp.4-7. Kent had 95,482 houses to Surrey's 95,372. The valuation in Surrey was £2,219,811 with the amount of the county rate being £32,543, whereas in Kent the valuation was £1,747,946 with a rate of £18,034. Surrey's county rate per head was much higher than the national average, but Kent's lower.

20) Based on the Kent and Surrey County Asylum Reports for 1853, only 21.3% of Kent's patients came from the metropolis, whereas in Surrey 77.7% did.

21) The more conservative nature of the Kent magistrates, which will be shown, was reflected in their political representation too. Analysis of the vote cast by Kent and Surrey politicians during the

debate initiated by Layard on the civil service and conduct of the Crimean War, illustrates that after the initial vote of censure on the government's handling of the army, most Tory politicians including the Kent M.P.s voted against civil service reforms. The more liberal minded M.P.s from Surrey although more aligned with Aberdeen's coalition government which fell, voted consistently for reforms. See Table 4 and 5.

22) Zangerl, C E, 'The Social Composition of the County Magistracy' in Journal of British Studies (1972) 11.

23) They included the bankers Denison, Cocks, Hope, Shadbolt and Barclay; a soap manufacturer Hawes; three insurance brokers Adams, Kemble and Roberts; three men connected with the East India Company Alsager, Crawford and Mangles; a glass manufacturer Apsley Pellat; a brewer Barclay; a builder Cubitt and an attorney Freshfield.

24) In Kent the figures suggest 5 of whig/liberal affiliation and 22 of conservative opinions of those traced to date. In Surrey the numbers break even at 14/14.

25) KCRO Cowper MSS, U449, Acc 837, O1, Lieutenancy Papers and selection of magistrates 1846-48, Viscount Sydney to Lord Cowper, 3 Jan 1847. In 1849 Sydney rejected the advances of one of his fellow poor law guardians, 'a Brewer, Maltster and bit of a farmer, who wants to become a magistrate - I can scarcely believe he will propose it himself - He is not a gentleman, nothing more than a common yeoman, who by screwing, skin and flint has..... amassed some money.' Ibid, O5, 16 Oct 1849 In this same correspondence see Whig M.P. Thomas Law Hodges' concern with the unfair political balance on the county benches, and the deliberate refusal to appoint two liberal minded men, a pilot and an apothecary to the Walmer bench, and an East India Company Director William Dench to the Bromley bench.

26) Aretas Akers 1799-1855 was the eldest son of a pioneer in the anti-slavery campaign. A staunch Tory and orthodox churchman, he was an extensive landowner. Akers was a magistrate in Kent and Sussex. He was allied by marriage to the Kent families of Blencowe, Daniel and Offley, all of whom provided members of the Kent magistracy.

27) Akers was not alone in corresponding with leading alienists. George Charles Pratt (3rd Earl and 2nd Marquess Camden) Lord Brecknock; was friendly with and corresponded with Sir Alexander Crichton.

28) J I Briscoe, Colonel Alcock, J Jeffery and C H Turner. The Society also attracted six Bethlem Governors.

29) As were W Cubbitt, J E Johnson, H Kemble, E^aR Adams, J Wilson and L Schuster. Three Kent magistrates also doubled up in this way, A Pott, J P Plumptre and T Poynder.

30) This also included H Drummond a Surrey County Asylum Visitor.

31) These include Reverend Trimmer of Middlesex, Dr Scudamore of Kent and H T Hope and R Sharp of Surrey. Morison Diaries 7 Aug 1840 and 31 Jul 1845. PRO/J103/2, 28 Feb 1853.

- 32) W G D Tyssen of Kent owned Brooke House, the Monro's asylum.
- 33) Shaftesbury, Seymour, Gordon, Vernon Smith and Clifford were all County magistrates. Also Lutwidge's family were heavily represented on the bench in Cumbria, and his nephew became a J.P. in Kent and Mayor of Tonbridge Wells.
- 34) SHA/PD/4, 23 Mar 1845.
- 35) Carlton Club, Travellers, Reform, Oxford and Cambridge, Brooks, Union and National. County Asylum Visiting Magistrates from both counties were members of these clubs. Magistrates from both were Directors of the Equitable Life Assurance Company (E R Adams and Henry Kemble from Surrey and E H Lushington from Kent) and men from both counties were also governors at Bethlem and members of the Statistical Society.
- 36) KCRO/C/MD/B1, 27 Jul 1837.
- 37) KCRO/Q/GC1/1, 10 May 1828, 25 Sep 1832, 7 Dec 1832 and 26 Dec 1832.
- 38) Sir A Morison's Diaries, 25 Aug 1840 and 8 Mar 1842.
- 39) Morison's Diaries, 30 Apr 1841, 28 May 1841 and 20 Aug 1842.
- 40) KCRO/U1515/OQ/L1, Marsham Papers, Adams to Poynder 28 Nov 1839, Adams to Marsham 7 Dec 1839, Poynder to Adams 6 Nov 1840, Adams to Poynder 16 Nov 1840, Adams to Marsham 22 Dec 1840, Poynder to Adams 5 Jan 1841 and Adams to Poynder 6 Jan 1841.
- 41) See Tables 6 and 7 for staff changes and death/cure rates.
- 42) KCRO/U840/Add/C549/19, 22 Jun 1849; See also Q/GC1/1, 16 Apr 1839 for complaints of the Greenwich Guardians about costs at Kent County Asylum compared with Middlesex County Asylum at Hanwell.
- 43) Ignatieff, M, A Just Measure of Pain pp.11-14; Crowther, M A, 'A Grand Tour of Total Institutions: From Dickens to Goffman,' Social History Society Newsletter, 8, (1983). (Summary of a paper given to the Social History Society Conference, Jan 1983.)
- 44) KCRO/Q/GC1/8, House Committee Minute Book, 8 Feb 1846; Also MH50/1, 21 Nov 1845.
- 45) In 1847 Surrey had 1 acre for every four patients. (97 acres for 402 patients) Even with the extension for 500, this left 1 acre for every 9 patients. Surrey possessed adequate acreage in 1847, certainly within the Commission's limits, and it was unfortunate that the Board chose to make it an issue at this time, when there were more important battles to fight.
- 46) See Medical Circular Vol V, 2 Aug 1854 and 8 Nov 1854 for discussion about the Superintendent at Norfolk not being given full authority. The Medical Circular also attacked the low wages paid to superintendents at Middlesex and Bedford, 3 Aug 1853 and 7 Jun 1854.

47) In 1853 Surrey had 82.4% dormitory accomodation, whilst Kent's was only 63.0% dormitories, reflecting the way in which the more conservative Kent magistrates were able to retain the original identity of their asylum longer.

48) Kent County Lunatic Asylum 15th Annual Report, 1860-61, pp.27-8; For Surrey see 1st Report of the Committee of Visitors in reference to the Memorial of the Guardians of Chertsey Union, with respect to the proposed enlargement of the Surrey Lunatic Asylum, 18 Oct 1859.

49) Morison Diaries; 15 May 1847. In Kent MH50/2, 20 May 1847 and Q/GC1/8, 15 May 1847.

50) 16 & 17 Vict c.96, s.xxvi and 16 & 17 Vict c.97, s.lvi.

51) James Edmund Huxley (1821-1907) Educ. at Ealing School where his father was a master, and at Charing Cross Hospital Medical School with his brother T H Huxley. The applications of both to Charing Cross were sponsored by the future Cardinal Newman. James then served an apprenticeship in pharmacy at Gloucester County Asylum, and with his brother-in-law Dr Salt, a colourful character who had fought with Byron's Legion in Greece. James was a founder member of the Medico-Psychological Association. Superintendent at Kent from 1846-63, when he was forced to retire from ill health. At Kent he beat 62 other applicants for the job, and followed George Poynder, another doctor who had been at Gloucester County Asylum before. Huxley, 'On the Existing Relations between the Lunacy Commissioners and Medical Superintendents of Public Asylums,' in J.M.Sc. Vol V, No.15, 1858.

52) MH50/2, 10 Jun 1847, 17 Jun 1847 and 7 Aug 1847; Also Q/GC1/8, 15 May 1847 and 18 May 1847.

53) KCRO/Q/GC1/8. See also Surrey Servants' Wages Book 1841-63, which is still held at Springfield Hospital, entry for John Richens, Head Attendant left 31 Jan 1850 not being permanently engaged, 'the office of head attendant abandoned.'

54) Scull, Museums of Madness, pp.175-6.

55) Morison Diaries: Morison dined with the licensed house visiting magistrates 23 Jul 1810, with the Surrey Militia 20 May 1810 and with individual magistrates 24 Jul 1840 and 3 Apr 1842 for instance. Dined at the Surrey Magistrates Club 14 Feb 1844, went to the Theatre with a Visiting Magistrate 29 Oct 1840 and dined with two at a Directors Meeting of the Equitable Life Assurance Company.

56) HO45/OS/4553 Among the reasons given why Huxley should be Visiting Officer to the County's Licensed Houses as well, were that his job was one of laborious routine, and the visits would, 'act as some relaxation to his mind and enable him to mperform his duties in the Asylum with increased energy.'

57) HO45/OS/8056 The Commission later sought help from the Home Secretary to back their intention not to relax this rule in the face of pressure from Superintendents.

58) KCA 16th AR, 1862, p.13.

59) For examples of this see, Lancet 6 Jan 1849 and 13 Jan 1849; Medical Times No.415, pp.573-4, 11 Sep 1847; Medical Circular Vol IX, 9 Jul 1856; J.M.Sc. Vol III, No.20, Jan 1857.

60) The stewards clerk and schoolmaster at Surrey, Mr East, had complained to the Commission in 1847 about the use of shower baths as punishment, but no action had followed, MH50/2, 25 Nov 1847.

61) MH50/8, 29 Jun 1856 and 18 Jul 1856.

62) Huxley, J E, op.cit., p.99; Also MH50/8, 6 Aug 1856 for Perceval's inquiry concerning Snape's objectionable practices.

63) John Elliotson (1791-1868) Son of a chemist and druggist. Educ. privately by the rector of St Saviour's Southwark, and at Edinburgh University, MD 1810. LRCP 1810. Then attended Jesus College Cambridge, MB 1816, MD 1821. In 1817 appointed assistant physician St Thomas' Hospital. Lectured on forensic medicine at Webb Street School of Anatomy. In 1823 founded the London Phrenological Society. In 1823 despite strong opposition he was appointed physician at St Thomas', and in 1831 became Professor of Medicine at the new University College London. He then campaigned and got the attached University College Hospital. In 1837 he witnessed a mesmeric demonstration and became a convert. Was a personal friend and physician to Procter, Forster and Dickens. The latter actively practiced mesmerism himself.

64) Medical Circular 9 Jul 1856.

65) See J.M.Sc. Vol IV, No.28, pp.534-547.

66) For similar arguments see the following section on Charity Hospitals in Surrey.

67) See Hervey, N B, 'Advocacy or Folly: The Alleged Lunatics' Friend Society 1845-63,' in Medical History (1986) xxx, p.253.

68) MH51/236, Circular No.63, 18 Sep 1856: This asked why baths were used, and with what object, whether they were ever administered without medical authority of which a record was kept, what officer was present, how long were they and what was the longest ever. Also the dimensions of the bath, whether there was a view hole to see the patient, the amount of ventilation, and the quantity of water in the cistern. Some pumped out water at high velocity making it difficult for the patient to breathe.

69) MH50/8, 1 Oct 1856, Huxley merely said that baths were used for the purpose of cleanliness, a palpable falsehood.

70) MH51/236, Circular No.70, 6 Aug 1857: This laid down that baths should never be used as punishment, that apart from cleanliness they should not be used without a doctor's permission, that a matron, head attendant or doctor should always be present, that a record should be kept of its duration, that any new form of shower over three minutes should be especially noted, that there should be a viewing hole to see the effects of the shower on patients, that the shower be locked when not in use and that the taps should be out of reach of patients.

71) J.M.Sc. Vol IV, No.23, Oct 1857, Report of the Superintendent.

72) Huxley argued along the same lines in relation to the use of employment. He suggested that the Commission and more especially Gaskell was pushing this form of treatment beyond its legitimate use, KCA 14th AR, p.19; See also J.M.Sc. Vol I, No.6, Jul 1854, for an article by Bucknill, J C, on similar lines. In fact the Commission was always careful to stress the therapeutic intention of work, and to criticise any approximation to penal work regimes. It opposed coir and oakum picking, and Wilkes commented unfavourably on the use of crank labour in Irish asylums to raise water. Its General Rules prepared in 1846, suggested patients be employed, 'as much as practicable.'

73) See the Surrey complaints in SCA 16th AR, 1858, p.30; The Commission in reply to the magistrates, said that the suggestions were not made until after, 'due consideration nor until the desirability and efficiency of the alterations had been tested by their introduction into other establishments.'

74) Huxley, J E, 'On the Claims of Systematic Warming and Ventilation,' in J.M.Sc. Vol III, No.1, 1856.

75) See LC 10th AR, 1856, p.28, for the Commission's recommendations about open fires, with direct reference to their cheapness. Before the inflow of fresh air could be accomplished, stale effluvia had to be removed. At Kent the gas furnace heated water pipes, and air was then sucked in over these, and pumped around the building. Afterwards the draught from the furnace was used to draw off stale air. Huxley maintained that the Commissioners were mistaken in their prejudice that artificially introduced air was impure, arguing that coal fires in fact produced much more noxious fumes. He hinted that the Board's change of heart was more likely to be related to the cost of these integrated systems, and also to the influence of an unqualified opinion, probably Lord Shaftesbury's, which shared a common preference for the cottage atmosphere, with open hearth fires.

76) See HO45/OS/7873, Memorial from the Kent Committee to the Home Secretary.

77) 8 & 9 Vict c.126, ss.II and IV.

78) This provision came in the 1853 County Asylum Act 16 & 17 Vict c.97, s.7. Some boroughs like Tenterden, Dover, Rochester and Maidstone had been in contract with Kent, but at the time of the Commissioners' survey in 1858 had been told that Kent Asylum no longer had room for their patients.

79) Greater detail for this can be found in the next section on Licensed Houses.

80) J.M.Sc. Vol III, No.19, Article by Bucknill on the LC 10th AR. See also The Select Committee on Lunatics 1859, PP 1859 1st Sess, III, p.85, Shaftesbury's evidence.

81) MH83/118, 30 Mar' 1857, Gaskell and Campbell's report to the Commission after attending a meeting at Barming Heath.

82) For examples see, KCA 16th AR, 1861-2, 'WE have a Lunacy Board who are ever seeking to extend and fill asylums, and so we have got too much law.' The Lunacy Commission was never able to grasp explanations for the increase in Lunacy figures which encompassed the concept of supply and demand. Even though it noted with interest in 1861 when comparing Maidstone and Canterbury, which had equal populations, that the former which had provided for its insane, had acquired double the number of pauper lunatics.

83) MH51/236, Circular No.58, 4 Jan 1855.

84) KCA 13th AR, 1858-9, p.18.

85) Huxley also suggested setting up properly supervised workhouse wards, as what he called parasyles (from par - equal, or para - besides, and asylum) and using them as little feeders to the main establishment, the county asylum, which would be for curing patients, KCA 15th AR, 1858-9, p. 18.

86) Scull, A T, op.cit., p.174. Scull felt that most mundane matters were left to the Superintendent so long as the Committee's control over finances was acknowledged.

87) LC 17th AR, 1863, pp.76-78.

88) See SCA 17th AR, 1859, p.17. Also KCA 15th AR, 1860, p.30.

89) MH50/5, 14 Jan 1852, the magistrates willingly agreed to discontinue Morison's practice of signing blank admission forms, so that the junior medical officers could send them in his name, even though he had not seen the patients.

90) See Digby, A, 'Changes in the Asylum: The Case of York 1775-1815,' in Economic History Review (1983) xxxvi.

91) The Commission had also tried to get the magistrates to increase the leave given to attendants, SCA 16th AR, 1858, p.12.

92) See Staff Ratios Table 8.

93) See Table 6 on the average working life of staff which dropped from three years in the 1840s to only one year in the late 1850s. See also the use of records post 1873 for Kent attendants, Tables 9-11.

94) See Tables 10-14 for evidence of this at Kent County Asylum. Staff rejected the tyrannical powers afforded matrons and MOs. See MH/Md2/As22, Book of Reprimands 1873-79, Entry for 3 May 1873. For another example see Rebecca King who left, 'because she cannot put up with her charge nurse Elizabeth Scott,' 27 May 1873.

95) Although the following examples come from a period that lies outside the years under study they are not irrelevant since they well show the end result of the policies adopted from 1845 to 1860. Over 50% of those hired between 1876 and 1880 were men previously in the forces. From the doctor's notes it is evident that they were selected for size and strength, their ability to play in the asylum band and a previous subservience to discipline. Despite the latter

73 were sacked or dismissed, compared to only 66 who left of their own free will. Female staff were slightly less troublesome, only 92 being fired, and 114 leaving voluntarily. However few of the staff were actually praised by the MO. Large numbers were described as 'rough' 'dirty' 'untidy' 'ill-mannered' 'low' 'stupid' 'saucy' or 'foul-mouthed'. In Oct 1873 Dr Kirkman described Elizabeth Bell as, 'a greasy, untidy, negligent party with torn dress and no apron.' Several of the female attendants were supplementing their income by prostitution in Maidstone, and had been prostitutes before. One nurse gave as her reason for leaving, 'that the Maidstone people regard all nurses from this asylum as being bad characters and insult them in the streets.' She added, 'too many of our nurses by their conduct in the public roads well justify the treatment they receive and bring disgrace upon the Institution.' See Table 14 for reasons given for sackings. KCRO/MH/Md2/As7, 24 Sep 1879.

96) Data supporting the above can be found in MH/Md2/As6, 7, and 22 passim. The Medical Casebooks suffer badly in comparison with those extant for private asylums.

97) See MH/Md2/As6, 31 Dec 1878, Emily Underdown gave her notice because the Superintendent would not promote her to charge nurse.

98) Mh50/10, 7 Jun 1860 and Mh50/11, 31 Oct 1860.

99) In 1842 the attendants at Bethlem all threatened to go on strike if their relaxation time was reduced, Morison Diaries 28 Nov 1842; In 1854 attendants at Worcester County Asylum went on strike which led to the Superintendent, Dr Grahamsley committing suicide, J.M.Sc. Vol I, No.7, 1854.

100) KCA 16th AR, 1861-2, pp.28-31. He cited its insistence that patients be prevented from lying on the floor because it made them look like animals. Repeated reference to this forced the Visitors to act, rather than appear deficient in comparison with other institutions. At Hanwell the use of force to pick a patient up from the floor, led to a struggle and broken ribs for the unfortunate inmate. Huxley suggested that this was a fine example on the part of the Commissioners of, 'straining at a gnat and swallowing a camel.'

101) Scull, Museums; Mallett, The Prerogative of Asylums passim; McCandless, 'Build! Build! The Controversy over the Care of the Chronically Insane in England 1855-70,' in Bulletin of the History of Medicine, (1979) lili, pp. 553-74; For a more hopeful view see Ray, 'Models of Madness in Victorian Asylum Practice,' in Archives Europeenes de Sociologie, (1981) xxii; also Walton, 'Casting out and bringing back in Victorian England: pauper lunatics, 1840-70,' in Bynum, Porter, and Shepherd, op.cit.

102) See tables on death, cure and discharge rates at Kent and Surrey.

103) For profiles of Kent and Surrey Licensed Houses, see Appendix J.

104) Magistrates visited, 'as often as they shall think fit,' from 1774-1828, which in Kent and Surrey was once p.a. modelled on the 'College of Physicians' visiting obligations. This became four times

p.a. from 1828-32, and then was reduced to three times p.a. between 1832 and 1845.

105) In Surrey for instance the magistrates often dined out together or in each others' houses, see QS5/6 for their use of the Hand and Spear, Weybridge; Spread Eagle, Commercial and King's Head, Epsom.

106) QS5/5/4, 11 Jan 1814 and 14 Oct 1824.

107) See Q/SB, 1787 for reference to a licensed house in Westerham.

108) QS5/5/4, visit to Great Fosters 1814/15. The same was true of Kent. At West Malling asylum, George Perfect, visiting medical officer who had an interest in the asylum signed many certificates of admission, CRO/QAlp/5. Similarly at Clapham Retreat and Peckham House, proprietors or their relatives certified patients to houses they had an interest in. It is also clear that proprietors regularly certified patients to each others' houses, see HQ44/51. Sometimes proprietors did show more care though. At Great Fosters Dr Lloyd delayed sending in some medical certificates because they had been signed by two practitioners of the same name. On checking he found they were related and had to get fresh ones signed, QS5/5/6 7 Aug 1840.

109) Kent Q/Alp/1, 6 Aug 1787 the magistrates freed Job Tripp because he, 'did not appear to us to be a lunatick or to be a proper object to be confined.' For Surrey see QS/5/5/3 Private Asylums Minute Book 1774-1813, during visit to Great Fosters 1791, doubts were expressed about Mrs Wheeler's insanity, and on the 1796 visit Elizabeth Brown was discharged, 'appearing upon a long and accurate examination not to be a fit object of confinement and no certificate being produced of her insanity.'

110) Minutes of the Visiting Magistrates, QS/5/5/3, 2 Aug 1791. Also Visitors' Minutes, QS/5/5/4, 5 Jul 1821. The magistrates allowed these patients to remain as Boarders despite knowing the risks.

111) In Kent for example Sir Henry Hawley Bart 1781-1814, Reverend Thomas Milner 1781-1793, and M D D Dalison, S W Cobb and J A Wigan 1832-45. In Surrey, W M Godschall 1774-1798, Reverend W Pennicott Clerk 1784-1802. Most of the Visiting Physicians remained in office a number of years. In A Morison's case it was for 53 years.

112) Q/Alp/3, Visitors Minute Book Kent, 5 May 1837, 16 Dec 1839. For Surrey contacting the Metropolitan Lunacy Commission, QS/5/5/4, 12 Mar 1830.

113) For Surrey see QS/5/5/4, 4 Sep at Great Fosters where few had been visited by relatives following the act, and Lea Pale for the same date where all except one had been visited.

114) Q/Alp/3, 5 Oct 1832 and 3 Apr 1840. For Surrey see Great Fosters, 21 Sep 1836.

115) See Lea Pale 12 Mar 1830 for Casebooks. QS5/5/4, 11 Jan 1822 for Lucett. For trial at home see QS5/5/6 Lea Pale, 21 Sep 1836.

116) Q/Alp/4 Account Book see 1836-7 for 2 May 1837, which records a letter to Perfect concerning the Justices' visit to West Malling projected for May the 5th.

117) See Metropolitan Lunacy Commissioners Report for 1844, p.64 for an account of this. Also Q/Alp/3, 2 Sep 1843 Report of John Hancock Hall, and 28 Nov 1843 for magistrates' report.

118) QS5/5/4, 4 Sep 1829; Q/Alp/3, 15 Dec 1837.

119) See Tables 15 and 16 for the catchment areas of West Malling, and the Surrey Licensed Houses.

120) PP 1826-27 (557) VI, pp.225-30.

121) See Scull, A T, 'The Domestication of Madness,' Medical History (1983) xxvi, pp.246-7.

122) Mellett, D J, op.cit., chapter 5.

123) These included a new kitchen and larder, a separate infirmary for the sick, three workshops, a washhouse, laundry and chapel.

124) LC Further Report 1847, Appendix G for a detailed account of the changes effected.

125) PP 1841 Sess 2, VI, 235 Copies of the Annual Reports of the Metropolitan Lunacy Commission to the Lord High Chancellor of Great Britain 1835-41, Reports for 1835 and 1836.

126) These figures are based on the Metropolitan Lunacy Commissioners Statistical Appendix to its 1844 Report.

127) Sykes, Lieutenant-Colonel W H, 'Statistics of the Metropolitan Commission in Lunacy,' read before the Statistical Society of London, 15 Jun 1840. See Tables 17 and 18 based on his figures. Sykes was forced by his colleagues to disguise the identity of the Licensed Houses whose figures he gave. The cipher he used is easily decoded. Using the Commission's list of Licensed Houses he merely transposed Holly House, Hoxton from near the bottom of the list and placed it second on the list between Earls Court House and the Clapham Retreat.

128) See Tables 17, 18, 19 and 20 for figures on mortality and cures in metropolitan Licensed Houses.

129) MH51/236, Circulars No.13 and 36; Also circulars No.17 and 28.

130) Compare for example entries in Surrey (QS5/5/6) before and after 1845.

131) See MacKenzie, C, op.cit., chapter III for Charles Newington's personal relationship with Aretas Akers who visited Ticehurst. Akers was also on personal terms with the owner of West Malling. Morison was friendly with Charles Summers the proprietor of Great Fosters, even though he was an official visitor. Summers also joined his Society for Improving the Condition of the Insane.

132) For details see MH51/44A, letters from J B Player to the Commission dated 10 Feb 1851, 13 Feb 1851 and 16 Feb 1851.

133) This was typical of the lack of contiguity between the Commissioners comments and those of the magistrates. See Q/GC1/1, report of the Commissioners, 3 Aug 1850, and that following by the magistrates, 14 Sep 1850. Then again the Commissioners on 9/10 Dec 1850 and the magistrates on 14 Dec 1850.

134) Peter Henry Davies (1812-1853) In the 17th Lancers for 15 years, and then worked as a police constable for 10 months. He was then outdoor porter at St Martin's Workhouse where there were occasionally insane inmates admitted. He had also looked after a single patient at Dr Hewlett's house at Harrow, and had tried to set up a hydropathic establishment at Harrow under the auspices of the middlesex magistrate, Benjamin Rotch, the owner of Denham Park, Uxbridge. Before the inquiry at West Malling Davies became drill master at Southwark Workhouse briefly. Subsequently he was appointed senior attendant on the insane at St Pancras Workhouse, where there was a scandal about the poor condition of the insane inmates in 1856 (See Times, 6 Mar 1856, p.9). In 1853 Davies went back to Southwark Workhouse as Superintendent of Labour but died the same year. See MH51/44A, Letter No.33 and MH12/7864, 4 Mar 1853 for details of his history on applying to Southwark.

135) See MH51/44A; Also LC 6th AR, 1851, pp.19-20.

136) MH51/44A, Letter 1, 19 Aug 1851, This man said that, 'upon public grounds I am resolved to lay the matter before the Lord Chancellor (through an attorney) and also in the public journals, as well as the 'Alleged Lunatics Society' unless the subject is immediately taken up by you.'

137) Maidstone Journal, Kentish Advertiser and South Eastern Intelligencer 6 May 1851.

138) MH50/5, 11 Feb 1852.

139) It was not just Shaftesbury who delivered these. See MH50/3, 1 Nov 1848 for Robert Gordon having spoken strongly to Mr Tow of Althorpe House; Forster MSS, 48 E 32, Procter to Forster, 21 Jul 1863; For Campbell see PP 1859 Sess 2, VII, p.47.

140) MH50/2, 2 Dec 1847 for Peckham; MH50/8, 30 Nov 1855 for Great Fosters; MH50/7, 25 Jan 1855 for Effra; MH50/3, 5 Jun 1848 for Althorpe and MH50/4, 13 Dec 1849 for Camberwell.

141) MH50/4, 7 Feb 1850; In 1847 the Commission had used Cole to investigate the conditions of a single patient in a house at Dartmouth Terrace, Lewisham where Cole's asylum was also situated. Cole also reported an illegal house at Westcombe Park, Blackheath in 1846 which was owned by Mr Byas the owner of Grove House, Bow. Cole almost certainly saw the latter as an attempt to open a rival institution south of the river, to compete with Peckham House and Dartmouth House, MH50/1, 15 Oct 1845; The Times 30 Oct 1848: The treatment recommended that the patient be kept in bed, wrapped in warm blankets; and given brandy in hot water with sugar and spice. The body was then submitted to friction with warm flannels and an

embrocation, before finally having bags filled with heated bran applied to it and chloroform administered at frequent intervals. In the intervals of chloroform, soda water brandy and milk were given. This treatment was continued for up to 24 hours and had the merit of preventing dehydration. The use of soda water also helped replace lost alkali. A possible measure of its efficacy is reflected in the cholera statistics. At Peckham 43 out of 78 died (55%). At Althorpe 6 out of 8 (75%) and at Camberwell 18 out of 23 (78%); MH50/5, 24 Jun 1852 and 30 Jun 1852.

142) Medical Circular Vol 8, pp.14-18, 53-55, 73-74 and 93-94; Vol 9, pp.234-5, 246-7. Entitled Psychiatrica: or Observations and Reflections upon the causes, nature and treatment of Insanity.

143) MH50/6, 2 Nov 1853.

144) MH50/9, 3 Feb 1858 for Peckham; MH50/6, 6 Feb 1856 for Effra; See also MH50/8, 6 Feb 1856 when Bush was only given a four month licence for Clapham Retreat;

145) See Table 21, for the relative balance of Peckham and Camberwell's private and pauper patients and the trend for overall numbers. See also Table 25 for the problem of controlling Camberwell's catchment area.

146) LC 11th AR, 1857, p.18. The Board acknowledged that they had to keep pauper licensed houses open as the only alternative would be to throw, 'huge numbers of the insane poor into their several workhouses.'

147) See discussion of this in the previous section and the section on workhouses.

148) Freeman had applied and been refused in November 1849 (MH50/4, 3 Nov 1849) and was again turned down in 1850 (MH50/4, 1 Aug 1850); For Richardson see MH50/7, 23 Mar 1855, when he applied for a licence for Grove House, Surrey Square, Old Kent Road.

149) She was the co-licensee of Cowper House with Walter Dobles in 1833. (Dobles was previously proprietor of Surrey House, Battersea in 1830.)

150) See footnote 77 in chapter 3.

151) MH50/7, 19 Oct 1854, 1 Nov 1854 and 21 Apr 1855.

152) See 8 & 9 Vict c.100, ss.LVII and LVIII.

153) MH50/11, 7 Aug 1861.

154) The Commissioners got this altered in the 1853 legislation (16 & 17 Vict c.96, s.31) which empowered it to make regulations.

Also) In 1853 Elliott was admonished for the poor diet at Effra, but this was the exception. For other examples of poor food in the better class asylums see, West Malling MH50/5, 2 Dec 1851 and Mh51/44A, during the inquiry for the cook's evidence.

- 155) MH50/1, 26 Mar 1846.
- 156) LC Further Report 1847, p.113.
- 157) MH50/2, 29 Mar 1847.
- 158) Royal College of Psychiatrists, Camberwell House Visitors Book, Entry for 28 Jan 1856. The steward whom they had examined and cautioned was not present when this was done. See also entry for 21 Feb 1859.
- 159) Camberwell House Visitors Book, 1 Feb 1858; for mealtime behaviour see 26 Feb 1853, 1 Nov 1856 and 6 Mar 1858; For another example see QS5/6, Commissioners report on Timberham Asylum, 8 Oct 1857.
- 160) Camberwell Visitors Book, 9 Nov 1850.
- 161) See Tables 22 and 23 for physical condition of those admitted to Camberwell.
- 162) The comma bacillus breeds in the intestines of its victims. Cholera is passed on by human hands or flies coming into contact with such excreta and infecting food. It also spreads if the water supply becomes contaminated with infected faeces. There was little certainty as to its water-borne origins, many contemporaries believing that it resulted from a contaminated atmosphere. The severity of the epidemic owed much to the dumping of malignant waste in the Thames.
- 163) For more detailed discussion see Lambert, R, Sir John Simon, *passim*; MH51/236, Circular No.22, 13 Jan 1848.
- 164) The escape of York House was the most remarkable, as it was adjacent to the Thames and obtained its water from the river.
- 165) Details taken from the LC 5th AR, 1850, Appendix C, pp.30-32; See also footnote 172 for details of the outbreak.
- 166) See footnote 199 in chapter 3.
- 167) MH50/3, 7 Feb 1849, 15 Feb 1849 and 23 Feb 1849. The re-opening was only approved after the Commission's new surveyor Mr Burn had seen the alterations.
- 168) MH50/4, 14 Feb 1850.
- 169) See also Effra Hall in MH50/6, 12 Oct 1853 and West Malling MH50/4, 15 Jan 1851.
- 170) For example the circular which dictated the amount of cubic space per patient in each room. This provided an excuse for cutting down numbers in each dormitory, MH51/236, Circular No.10, 15 Sep 1846.
- 171) Camberwell Visitors Book, 16 Feb 1850, Visit of Mylne, Campbell, Hume and Gaskell; LC 5th AR, 1850, p.6; For more detailed discussion see MH50/4, 28 Feb 1850. In December 1852 the

Commissioners discovered that, 'the beds of the attendants in the same room (although they sleep nearer the fire) are supplied with one blanket more than the patients have and also a thicker counterpane, and that their beds are nearly a foot wider.' Camberwell Visitors Book, 4 Dec 1852.

172) For example see Surrey CRO, QS/5, Timberham House Commissioners visits for changes effected during several consecutive visits, 3 Jul 1857, 8 Oct 1857, 29 Apr 1858, 7 Oct 1858, 25 Feb 1859. During this time the Commission got ironwork removed from the house, procured better clothes for patients, insisted that they be allowed to wash in their own rooms and got the airing grounds enlarged. It was unable however to secure a more regular visitation by relatives.

173) MH50/8, 9 Apr 1857; Camb. Visitors Book, 19 May 1858. In some asylums poor recording was taken as evidence of doctors not spending enough time with patients. See MH50/3, 19 Apr 1849, for the poor quality of recording at Goudhurst; MH50/10, 3 Nov 1859 for Hawkhurst; Q/GC1/1, Commissioners report in the Patients Book, 3 Aug 1850; MH50/4, 7 Feb 1850 for Dartmouth House; MH50/9, 12 Feb 1858 for Camberwell; MH50/2, 19 Aug 1847 for Althorpe; MH50/1, 2 Apr 1846 for York House; The Commissioners eventually obtained legislation which required weekly recording on patients.

174) Mackenzie, C, op.cit., chapter III, for discussion of lady companions; Also Digby, A, Madness, morality and medicine a study of the York Retreat 1796-1914, Cambridge 1985, p.307; Charles Elliott of Effra Hall used to take his patients to a house in Worthing.

175) All of these proprietors were members of Alexander Morison's Society, and met regularly for parties at each others' houses/asylums, and in professional associations such as the A.M.O.A.H.I.

176) George Stilwell of Church Street Epsom held a similar post in Epsom, and so did John Hayball Paul of Camberwell House, in Bermondsey, and William Connor the Visiting surgeon to Althorpe House, Wandsworth and Clapham, see Medical Directory 1857. See Medical Circular Vol II, No.39, p.239 for discussion of this issue. Dr Burnett of Westbrook House Alton attacked the praise Winslow had received for living in his asylum and eating with his patients suggesting on the contrary that he was never there at all.

177) This can be compared with Bethlem, where 5 male and 4 female nurses, alone, remained between 1841 and 1851. (Taken from the census returns for 1841, 1851 and 1861)

178) See also Effra House MH50/9, 24 Apr 1858 and MH50/11, 16 Aug 1861.

179) See Table 26 for ratios.

180) MH50/2, 18 Nov 1847 and 25 Nov 1847.

181) MH50/7, 18 Jul 1855 for Clapham; MH50/6, 8 Apr 1853 for Effra; MH51/44A, for West Malling; Camberwell Visitors Book, 15 Jun 1846.

182) See footnote 156 in chapter 5. Also LC 6th AR, 1851, p.17; Also Times 4 Jan 1851 and 11 Jan 1851.

183) In 1864 the Commission was still complaining about nursing staff, PP 1864 XXIII, pp.58-59.

184) See footnote 132, chapter 4. In addition to Effra, Peckham and West Malling of the Kent and Surrey houses mentioned there, see MH50/10, 1 Feb 1860 for Clapham; Medical Directory 1854 for Goudhurst. It may well be that the high turnover of staff was related to the large number of violent patients admitted at some asylums.

185) At several smaller asylums with up to 10 patients, the Commissioners often noted that none of the patients were under medical treatment.

186) In fact Lea Pale, Timberham and Church Street Epsom hardly used it at all. Surrey CRO, Qs5/6, passim.

187) MH50/3, 29 Jun 1848 and 23 Mar 1849.

188) LC 10th AR, 1856, p.24. 'Independently of the benefit likely to arise from a different method of medical and moral treatment, it is found that the mere change of scene has invariably a tendency to interest the patient.' MH50/3, 5 Jul 1848 York House was asked to move Miss Lee to Northampton or Leicester.

189) MH50/4, 7 Feb 1850 for Dartmouth House; MH50/4, 3 Dec 1850 for Church Street Epsom; MH50/6, 19 Jan 1853 for North Grove House; Mh50/4, 18 Jul 1850 for Peckham House.

190) QS5/6 Report on Great Fosters 15 Jul 1850; Camberwell Visitors Book, 26 Feb 1853.

191) In some licensed houses private patients were placed in pauper accommodation if they were disruptive. At West Malling this occurred, see MH51/44A, report of Turner and Procter 11 Dec 1850 especially on Mr Vaux. This practice also occurred at Fishponds asylum in Bristol, HO45/OS/2797 Report of the Cairman to Gloucester Epiphany Court of the Quarter Sessions, 2 Jan 1849.

192) Medical Directory 1846, p.29.

193) KCRO/Q/GC1/1, Commissioners Report 3 Aug 1850. Patients at Great Fosters tended to spend a lot of time in their rooms as well.

194) Camberwell Visitors Book, 14 Jun 1852; QS5/6, Commissioners' Visit to Timberham, 7 Oct 1858; MH50/4, 21 Feb 1850 for Clapham.

195) QS5/6, 13 Sep 1859 and 26 Jun 1860; MH50/8, 28 May 1856 for Clapham; Wellcome Institute for the History of Medicine, Camberwell House Casebook, Vol 2, (Acc No 334939 Press Mark 6648, 31 Mar 1847 to 5 May 1850) entry dated 19 Jan 1847 for Clarke.

196) See MH50/118, May 1861 for a long account of how Forbes Winslow was reprimanded because the M.P. Andrew Steuart was allowed to leave.

Brandenburg House and went to the House of Commons to vote on the Budget debate.

197) Camberwell Visitors Book 13 Oct 1857, 4 Sep 1858 and 3 Jun 1859; MH50/9, 16 Dec 1857 and 4 May 1858 at Peckham House.

198) QS5/6, 3 Jul 1857 Commissioners report for Timberham.

199) MH50/4, 27 Feb 1851 and 20 Mar 1851.

200) Royal College of Psychiatrists, Camberwell House Visitors Book, and the LC Further Report 1847, p.457.

201) Work was clearly tailored to a patient's condition and often, 'light employment' is mentioned for delicate inmates. In 1847 Dr Paul referred to a manic patient, Gervaise Hunt, for whom he felt constant employment was, 'the only means of restraining his passionate nature.' Camberwell House Casebook, Vol 2, 14 Jul 1847.

202) Camberwell House Casebook, Vol 2, 6 Apr 1850.

203) MH50/9, 24 Apr 1858 for Effra; MH50/10, 4 Jan 1860 for Peckham;

204) MH50/8, 27 Nov 1856 and MH50/10, 29 Feb 1860.

205) MH50/3, 1 Feb 1849. This circular resulted from the case of a patient at Clapham House who paid £325 p.a. but received very inadequate accommodation and attendance.

206) These were obtained for Camberwell and Peckham in December 1849, for Clapham and Dartmouth in February 1850, for Effra in March 1853 and for Great Fosters in May 1855. See Lunacy Commission's Minutes.

207) MH50/4, 6 Nov 1850.

208) MH50/8, 11 Jan 1856; MH50/7, 31 Jan 1855. See also Mackenzie, C, op.cit., chapter III, section 4.

209) See footnote 115 in chapter 4.

210) See Appendix J for the background history of these two hospitals.

211) MH51/48, File on Criminal Lunatics at Bethlem: Letter from Conolly to the Commission, 27 Apr 1863.

212) Alderidge, P, 'Bedlam: fact or fantasy?' in Bynum, W F, Porter, R and Shepherd, M, op.cit., Vol 2, chapter I.

213) SHA/PD/2, 26 Nov 1841, Shaftesbury jokingly talked of building a new large ward in Bethlem for the Puseyites.

214) Scull, A T, The Domestication of Madness, op.cit., passim.

215) PP 1814-15, IV, 801, 1st Report: Minutes of Evidence taken before the Select Committee appointed to consider of provision being made for the better regulation of Madhouses in England, pp.11-16.

The alderman fainting might be considered more exceptional, in context of the general levels of stench Londoners were accustomed to at this time: Two keepers and an assistant looked after 75 patients at this time.

216) Bethlem Archives, General Committee Book, Attendance of Governors 1833-48; Peter Laurie was one of the most assiduous attenders, 145 out of a possible 155 meetings. The Surrey magistrate J I Briscoe only attended 15 out of 40 meetings between 1846-48. Of those whose opinions were recorded in 1800, only 70 out of 229 nominal governors (30.5%) were willing to serve on the House Committee.

217) Metcalfe, U, The Interior of Bethlem Hospital: Humbly addressed to the Duke of Sussex and to the other Governors, London 1818.

218) Bethlem Archives, Correspondence of the Steward George Walleth, 24A, 29 Jul 1818 Dr Barron to G Walleth; 23 Sep 1818 John Warburton to G Walleth; 24 Sep 1818 J Mole to G Walleth; 15 Oct 1818 Mrs Forbes to the Committee; The matron too cared for private patients whilst employed at the hospital and was probably having an affair with the Home Office inspector Mr Capper, who sanctioned the clandestine farming out of criminal inmates.

219) Bethlem Archives, Staff Salary Book, SB/1/3 Michaelmas 1842 - Xmas 1856, see Thomas Hooper for example who worked in the criminal wing from xmas 1817 to xmas 1852.

220) Martin, F O, An Account of Bethlem Hospital: abridged from the Report of the Late Charity Commissioners, London 1853.

221) See Morison Diaries, 11 Mar 1841, for Horne an ex-Bethlem keeper set up by Morison. See also Bethlem Governors, Standing Rules and Orders for the Governors of the Royal Hospitals of Bridewell and Bethlem with the Duty of the Governors and of the several officers and servants, London 1802.

222) See Hervey, N B, Bowhill House, St Thomas's Hospital for Lunatics, Asylum for the Four Western Counties 1801-69, Exeter 1980, pp.49-53. Also Journal of the House of Commons, Vol C, 11 Jul 1845 for petition of York Hospital; and Journal of the House of Lords, 1845, p.842, 21 Jul 1845 for petition from the Warneford Hospital, Oxford. For most Charity Hospitals proposals for a Lunacy Commission were indicative of mistrust and suspicion of their efforts.

223) See Martin, F O, op.cit., for details of Bethlem; For Guys see GLC Record Office, H9/GY/A3/6/1, 23 Apr 1828 and also 12 Nov 1828.

224) In 1845 there were at least 19 Bethlem Governors in the House of Commons, and 13 in the House of Lords. In 1858 there were still 18 in the Commons and 9 in the Lords. (Figures taken from the Names of Governors Book, Bethlem Archives.

225) 8 & 9 Vict c.100, s.xliii. Also under s.i they had to have an admission book; under s.ii the form of their disorder had to be recorded; under s.iii notice of their admission had to be sent to the Commission, after 2, and before 7, days; under s.iii they had to

have a book for removals, discharges and deaths; and under s.1v they had to report deaths.

226) MH50/1, 2 Aug 1845, the Commission applied to visit St Lukes at the same time.

227) MH50/1, 19 Nov 1845, 3 Dec 1845 and 9 Jan 1846.

228) MH50/1, 31 Jan 1846 for the conference with Harrison; For act see 8 & 9 Vict c.126, s.42.

229) MH50/1, 2 Apr 1846; Also Guys Papers, H9/GY/A3/7/1, 20 Mar 1850 Report in which the onerous financial nature of a full-time resident physician is mentioned.

230) Morison Diaries, 26 Jul 1844, 21 Jul 1845 for interference in Lunacy legislation and his son's role as head of the Lunacy Commission; Also 1 Apr 1842 for Morison's invitation to the 6th Earl to become President of the Society.

231) MH50/1, 19 Aug 1847 for 1st application; MH50/2, 24 Feb 1848 decided not enough grounds; MH50/5, 16 Apr 1851 again do not proceed; MH50/5, 12 Jun 1851 final agreement; See Ho45/OS/4995, for other evidence of abuses forwarded to the Board. See chapter 5, pp.294-5 and footnote 41.

232) HO34/10B, 5 Jun 1851 for Sir George Grey's letter authorising a visit to Bethlem. Grey was clearly unsure of his position as Home Secretary, in relation to the Lord Chancellor. The under-secretary wrote, 'I am to request that you will inform Sir G Grey whether you are of opinion that the order, if made, would authorise a permanent or periodical inspection of Bethlehem Hospital. It appears to Sir G Grey that such an inspection is contemplated by you, but he is of opinion that the object of Parliament in the 116th clause of 8 & 9 Vict c.100 was only to sanction a visitation on some special occasion founded on particular circumstances.'

233) Peter Laurie (b.1809) Educ. St Peters Coll Cambridge. JP 1831. LI 1833. Sheriff of Middlesex 1833. Governor of Hanwell.

234) LC 7th AR, 1852-53, pp.25-26.

235) Bethlem Hospital, The Report of the Commissioners in Lunacy to the Secretary of State together with a copy of the evidence on which such report is stated to be founded, London 1852, p.67; To be balanced against this biased reading of the evidence, is the fact that the Commissioners did not bother to hear a lot of evidence of abuse which was offered from other quarters, including some which arrived late. See MH50/6, 11 Nov 1852 and 24 Nov 1852 for instance.

236) One of the Governors complaints was that the Lunacy Commission did not give them sufficient time to formulate a reply to assertions made in the Report. The fact is that they received the report on the 27 Feb 1852 and did not reply to the Home Secretary until 29 Nov 1852.

237) Conolly, J, The Construction and Government of Lunatic Asylums, London 1847, pp.1-39 and 181-2.

238) Baly, M, Florence Nightingale, London 1985: St Thomas' had to be removed because the South Eastern Railway Company had acquired part of the Hospital site by compulsory purchase in 1859; F Nightingale was very taken with the idea that the architecture of some institutions encouraged idleness and immoral behaviour. Any useless nooks and crannies were therefore to be ironed out so that nurses were in full view at all times. This idea was not so far removed from the kind of thinking behind Bentham and the Panopticon. At Kent County Asylum nurses in the 1870s were frequently sacked for idling in odd corners of the asylum, or turning down the gas lamps to hide in a corner with staff of the opposite sex, see MH/Md2/As7, Florence Temenia Whitem, hired 21 Oct 1878, on 16 Nov 1881 got a severe reprimand for putting out the gas in the covered way between the old and new buildings and (kissing). Also MH/Md2/As7, Thomas Smith, hired 16 May 1879, was demoted from 2nd to 3rd class nurse on 15 Nov 1880 because found with a nurse in a passage having put out the gas.

239) For supporting evidence see British Museum Add MSS, Nightingale Papers, 40395, 10 Oct 1864, Lunacy Commission Secretary to F Nightingale; 7 Dec 1865, Shaftesbury to F Nightingale; also ff.192, 194 and 196; MH51/48, letter dated 12 Jun 1863 to Shaftesbury from the Committee for the prevention of the removal of St Thomas's Hospital to a distance from the poor of South London asking his support.

240) After the Board's intervention in 1856, over 60 patients a week were taken out locally for walks, see Bethlem Hospital Visitors Book 1854-88, Campbell, Gaskell, Lutwidge and Wilkes' visit on 5 Feb 1856 and Campbell, Gaskell and Nairne on 19 Mar 1857.

241) MH50/8, 16 Apr 1856 Governors decline. See chapter 5, footnote 29, and p.290; MH50/8, 28 May 1856 for the Commissioners request to the Home Secretary not to approve any structural alterations. In 1858 the Hospital did in fact move 40 of the more tractable criminal patients into one of the ordinary wards. A billiard table and library were provided for them, and some female patients, committed whilst suffering from puerperal mania, were allowed to walk out.

242) See MH50/10, 12 May 1859, 23 Jun 1859 and 29 Jun 1859.

243) PP 1860, XXII, pp.9-14; Forster MSS, 48 E 32, Procter to Forster, 29 Mar 1862; MH51/48, Criminal Lunatics at Bethlem, J E Johnson to the Commission, 22 Jun 1863.

244) MH51/48, see F O Martin to the Commission, 3 Mar 1864; also MH51/48, Shaftesbury to M C N Hamilton, 23 Jun 1863, and reply on 27 Jun 1863. The main support for the Commission came from the A.M.O.A.H.I. (see MH51/48, 10 Jul 1863 when Harrington Tuke wrote to the Commission on behalf of the Association) which also approved of the removal of Bethlem outside London. See chapter 4, footnote 10.

245) 9 Apr 1851, 10 Feb 1852, 18 Mar 1853 and 4 May 1854 (reported in Guy's Records, HG/GY/A3/8/1, letter dated 2 May 1855). The issue was also mentioned in the LC 9th AR, 1855 and LC 10th AR, 1856.

246) HG/GY/A3/8/1, 18 May 1853.

247) HG/GY/A3/8/1, 6 May 1857 Treasurer of Guy's to Roundell Palmer Q.C.

248) The Commissioners approached the Law Officers for a judgment, but the latter said Guy's Will only stated that the Governors, 'may, not must,' receive incurable lunatics, Solicitor General H M Cairns and Mr G M Clifford, MH51/750, 5 Nov 1858.

249) See Hervey, N B, Bowhill House, op.cit., for an example of an excellently run charity hospital, with a very efficient recording system.

250) The majority of examples for Kent will be taken from Greenwich Union, as it had more lunatics in the workhouse than any other authority. For a complete list of Unions in each county see Table ?.

251) PP 1837 XLIV 731.

252) KCRO Lunacy Miscellaneous Kent, P371/8/1, 13 May 1748 for example, when the Tonbridge Vestry Meeting decided to build a house for lunatics.

253) In Kent lunatics went to the county asylum, and in Surrey to the metropolitan licensed houses as Springfield was not yet built at this time.

254) GLC Record Office, CA/BG/173/1 Workhouse Register 28 Jun 1837 - 24 Oct 1837; Also CA/BG/173/2 Workhouse Register 5 Mar 1854 - 29 Sep 1855 shows that because of a later decision to open a special ward for the insane there were still many resident who would have been classed as lunatic (49 out of 830).

255) Reigate Guardians, Kingston RO, BG9/11/1, p.87, 25 Jan 1837; BG9/11/1, p.368, 18 Dec 1839; See also MH12/12575/8262/5 Sep 1838; For Kingston Guardians see Kingston RO, BG8/11/1, p. 125, 16 Sep 1840; Reigate initially resisted having its patients in the county asylum at all because of the cost (as did Chertsey and Epsom, Morison Diaries 5 Sep 1841) see PRO/BG1/11/3, p.253, 22 Oct 1844. Eventually these union's patients were moved to Springfield from the licensed houses at Bethnal Green and Hoxton.

256) Poor Law Commissioners' Report 1834, p.430; Richmond Union to the Poor Law Commission MH12/12597/3593a, 2 May 1839.

257) MH12/5094/714a, Guardians to the PLC, 18 Jul 1843.

258) PLC 8th AR, 1842, pp.79-104.

259) MH12/5094/2427a, Guardians to the PLC, 6 Mar 1843; MH12/5094/6127a, Greenwich Relieving Officer to the PLC, 14 Apr 1843; MH12/5094/11968a, Report by Dr Arthur Farre, 9 Oct 1843. In April 1843, an idiot, Edward Wilson was admitted to the infirmary in poor health, but allowed to wander out again unnoticed.

260) MH32/36, Mr Hall's Correspondence, Visits in the Quarter ending 29 Sep 1843.

261) For Dorking see, MH12/12219/484a, 9 Jan 1839; For J P Plumptre see the introduction to this chapter, and PLC 2nd AR, 1836, pp.496-98.

262) Rogers, P G, Battle in Bossenden Wood: The Strange Story of Sir William Courtenay, London 1961, p.86; Gangs of men also assembled at Doddington, Hernhill, Lynsted, Teynham, Throwley and Upchurch in Kent to demonstrate against the New Poor Law.

263) Rogers, P G, op.cit., pp.186-93. Three of the surviving rioters were sentenced to transportation, (2 for life) and the other six got one years hard labour, with a month in solitary confinement.

264) See chapter 5, p.311 and footnote 85.

265) See chapter 5, p.323 and footnote 109.

266) Amongst these were Aylesford North, Ashford East and Dartford in Kent, and Rotherhithe in Surrey.

267) See MH12/5095/11743a, 1 Oct 1845 and 7 Oct 1845. On this occasion the PLC did consult the LC before replying.

268) MH12/5098/21439, Dr Walker to the LC, 24 May 1854; MH12/5098/23285, Dr Walker to the LC, 9 Jun 1854; MH12/5098/24405, 15 Jun 1854, Walker continued to try and implement the law, despite the fact that the Guardians withheld his fee, which the magistrate had certified.

269) MH12/5098/28879, Guardians to the Poor Law Board (as it had become in 1847) 31 Jul 1854; MH12/5098/31071, LC to the PLB, 22 Aug 1854; See Table 27 for statistics of Greenwich's use of the workhouse.

270) MH12/192/1853/45228, Joseph Arthur MD to the Greenwich Guardians, 28 Nov 1853.

271) MH12/192/1850/28084, Lewisham Guardians to the Greenwich Guardians, 30 May 1850; MH12/192/1850/28084, Greenwich Guardians to the PLB, 10 Jun 1850; MH12/192/1853/42319, Greenwich Workhouse Master to Richard Hall Assistant Poor Law Commissioner, 15 Nov 1853.

272) MH12/5094/6127a, LC to Greenwich Guardians, 5 Jun 1843.

273) MH12/4822/3040, Guardians to the PLB, 23 Jan 1858.

274) MH12/4822/7567, Guardians to the PLB, 27 Feb 1858; MH12/4822/11266, Dr A B Andrews to the PLB, 31 Mar 1858; MH12/4822/11266, Guardians to the PLB, 1 May 1858; MH12/4822/11266, 23 May 1858, The Poor Law Board's reply to the Guardians of Blean went on to say, 'If any pauper when so visited is not in fact a lunatic, the mere circumstances of his being included in the quarterly return of the M.O. will neither make the pauper a lunatic within the meaning of the Act; nor entitle the M.O. to a fee.' Dr Andrews' description was most certainly of a melancholic patient, and the above reply suggests that the Guardians would either have had to get a further medical opinion to verify the patient's lunacy,

or more likely, make the decision themselves as to the M.O.'s judgment.

275) See Table 28 re. No. of workhouse visits. See footnote 90 chapter 5 for previous visitation arrangements. Also, LC Further Report 1847, App A; MH50/6, 16 Feb 1854; MH50/8, 4 Jan 1856; MH50/8, 18 Feb 1857; MH50/9, 14 Jul 1858; MH50/10, 2 Dec 1858; MH50/10, 29 Feb 1860. After each visit to a workhouse Commissioners submitted a report within 14 days, which forwarded without their name attached to the Poor Law Board. MH50/6, 16 Feb 1854, Reports were to include the date of the visit; the number of patients and their names, with the nature of their malady; the number and names of patients getting the sick or extra diet; details of the clothes and bedding; the names of patients restrained or secluded with the cause, and the name of the M.O. and how often he visited.

276) See Davies, J A, John Forster: A Literary Life, Leicester 1983, p.117; Also Forster MSS, 48 E 32, 26 Oct 1858 Procter to Forster; 48 E 32, 29 Oct 1858 Procter to Forster; 48 E 32, 29 Nov 1867 Procter to Forster; See also 48 E 32, 1 Aug 1862, Procter to Forster, 'Sometimes I think of you, wasting the blossom of your youth in workhouses.'

277) PP 1859 1st Sess III, p.70; Also PP 1860 XXII, pp.26-27.

278) See LC 1st AR and PP 1846 XXIV 374.

279) Dover and Thanet also built separate lunatic wards. See Table 27 for use of workhouses by different authorities.

280) SCA 18th AR, 1860, Table on the distribution of pauper lunatics and Idiots.

281) See MH50/8, 18 Jul 1856; LC 11th AR, 1857, p.22 There were eight successive complaints about Surrey County Asylum in 1856, among which were two, from Lambeth and Chertsey. In all cases workhouses were forced to hold dangerous patients because of the lack of room at Springfield. Lambeth were redirected to Berkshire, Buckinghamshire, Hampshire and Oxford County Asylums. Often once patients had been placed this far away the Guardians did not visit and had to be reminded, see MH12/12152/11097, 4 Apr 1867 for Chertsey and Kingston Record Office, BG6/11/7, p.374, 17 Mar 1849, for Guildford.

282) MH50/8, 4 Jan 1856 and MH50/9, 16 Jun 1858 for Chertsey; MH50/3, 29 Jun 1848 for Lambeth; MH50/7, 12 Sep 1854 for St Mary Newington; MH50/9, 28 Jul 1858 for Guildford.

283) PP 1859 Sess 2 VII, pp.187-93.

284) For Camberwell's Petition see H045/OS/6749. This also contains information about those submitted by Ash, Chertsey, Dorking and Guildford. The petitions from Camberwell and Chertsey were presented by J I Briscoe, one of the Visiting Magistrates to Springfield, who was presumably among the 15 out of 28 who voted in favour of extending the asylum, rather than erecting another.

285) LC Supplement to the 12th AR, 1857-58, pp.56 and 58.

- 286) MH12/12339/34842, 30 Aug 1859. For some of the references on Surrey I am indebted to, Gibson, The Treatment of the Poor in Surrey Surrey PhD 1978.
- 287) PP 1863 XX, LC 17th AR, pp.150-75.
- 288) LC Supplement to the 12th AR, 1857-8, p.11. It was also incumbent on Masters, under the General Consolidated Order 27, to report to the Union M.O. when it was used.
- 289) MH50/6, 16 Mar 1853 and 30 Mar 1853 for Lambeth; LC Supplement to the 12th AR, 1857-8, p.26; See also MH12/12372/19541, 8 May 1858 for Ann Nye of Hambledon under restraint.
- 290) See chapter 5, footnote 105 and p.320.
- 291) LC Supplement to the 12th AR, 1857-8, p.9.
- 292) MH32/62, in Kent they were Ashford East, Ashford West, Bromley, Cranbrook, Hollingbourne, Romney Marsh and Tunbridge; In Surrey, Ash, Dorking, Epsom, Godstone, Wimbledon and Kingston.
- 293) PP 1863 LII (85), Return of the Unions in England and Wales in which the sane are not intermixed with the insane, and where lunatic wards have been established, 1861-62.
- 294) Kingston RO, BG9/11/4, p.58, 31 Mar 1846; In 1857 Elizabeth Hickford was removed from Dorking Workhouse because of being a danger to herself, 'through helplessness,' MH12/12223/10122, LC to Dorking Union, 14 Mar 1857 and Kingston RO, BG2/11/6, p.73, 19 Mar 1857 for the Guardians agreement.
- 295) MH12/12241/21828, Epsom to the PLB, 28 May 1858; MH12/12338/29429, Colonel Piggott's MSS Report, 12 Jul 1858; MH12/12338/30522, LC to the PLB, 24 Jul 1858.
- 296) MH12/12149/13375, LC to Chertsey Guardians, 12 Apr 1858; MH12/12338/34842, PLB to Guildford Union, 16 Sep 1859; LC 17th AR, 1863, p.161.
- 297) The Kingston Guardians allowed lunatics daily meat, with porter or beer, and sweetened tea with bread and butter. At Dorking they instituted feather or flock beds and at Reigate the day room was well decorated. Kingston RO, BG9/11/4, p.63, 19 Sep 1846; For Dorking see, MH12/12223/27175, LC to PLB 17 Jul 1854; For Reigate, Kingston RO, BG10/11/5, p.52, 17 Aug 1848.
- 298) MH12/12306/456, Report of a visit by S Gaskell on 17 Dec 1853.
- 299) As with chapter 4, the chancery figures are taken from Bond Books which registered every chancery patient's estate and place of residence. See Tables 29-31 for chancery figures in Kent and Surrey.
- 300) See Table 31.
- 301) See chapter 4, footnote 162; Morison Diaries passim; For Sibbald see, Morison Diaries 13 Jul 1842;

- 302) Morison Diaries, 26 Sep 1845, Morison, ' advised Mrs Huxby from Brixton to get nurse (Mrs Pascoe) but not to leave her daughter in lodgings with nurse, but to keep both at home.' Morison Diaries, 11 Nov 1842 and 28 Oct 1843, for evidence of restraint involving Lady Baker's son who was kept in a strait waistcoat at night because of his onanism;
- 303) MH50/41, 27 Nov 1845;
- 304) See MH50/41, entries for 1845.
- 305) See chapter 4, footnote 180.
- 306) MH50/3, 14 Dec 1848; See MH50/4, 29 Jun 1849 for the Lunacy Commission's subsequent follow up.
- 307) MH50/4, 28 Jun 1849 and 6 Feb 1850.
- 308) MH50/3, 19 Jan 1849, 1 Feb 1849, 15 Feb 1849, 22 Mar 1849, 26 Apr 1849, 10 May 1849 and 11 May 1849.
- 309) See MH50/5, 12 May 1852. On 24 Jun 1852 Robert Baker was reprimanded and cautioned by Shaftesbury.
- 310) MH50/5, 26 May 1852.
- 311) MH50/2, 14 Oct 1847. Morison did not notify many of the lodgings he helped set up. In 1856 the Commission Dr Graham for his infrequent visits to Mrs Dawson and his neglect of the Medical Visitation Book. Graham was only one of several unsatisfactory carers that Morison helped obtain patients for. MH50/8, 30 Jul 1856 for Commissioners' comments. See Morison Diaries, 25 Feb 1842 for his early contact with Dr Graham.
- 312) See Tables of females over males among paupers and chancery patients in Kent and Surrey.

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WORKHOUSE VISITATION BY THE COMMISSIONERS 1845-1860

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TABLE 1

TOTAL POPULATION

	Nationwide	% Increase	Kent	% Increase	Surrey	% Increase
1801	9,061,000	--	308,667	--	268,233	--
1831	13,994,000	54%	479,558	55%	486,434	81%
1841	15,929,000	14%	549,353	12%	584,036	20%
1851	17,983,000	12%	615,766	11%	683,082	17%

TABLE 2

METROPOLITAN POPULATION IN KENT AND SURREY

	Numbers in the Metropolis 1801	% of all inhabitants in the county	Numbers in the Metropolis 1851	% of all inhabitants in the county
Kent	50,503	16.3%	133,452	21.7%
Surrey	161,642	59.6%	480,472	70.3%

	Increase in Metropolitan Population	Increase in Rural Population
1801-1851		
Kent	164%	86%
Surrey	197%	85%

TABLE 3

POPULATION OF PAUPER IDIOTS AND INSANE

		Population	Pauper Insane and Idiots	Rate per 10,000 Population
1837	Kent	514,455	468	9.09
	National	15,104,000	13,667	9.04
	Surrey	535,235	504	9.41
1842	Kent	555,994	478	8.59
	National	16,130,000	15,919	9.86
	Surrey	593,940	591	9.95
1847	Kent	589,200	596	10.11
	National	17,150,000	17,722	10.33
	Surrey	643,463	717	11.14
1852	Kent	627,936	680	10.82
	National	18,193,000	21,158	11.62
	Surrey	697,883	977	13.99
1857	Kent	688,790	915	13.28
	National	19,256,000	27,693	14.38
	Surrey	771,888	1,232	15.84
1860	Kent	725,304	1,054	14.53
	National	19,902,713	32,993	16.58
	Surrey	816,291	1,608	19.69

Source: Population figures: Mitchell and Deane, Abstract of British Hist. Statistics pp.8-9. Figures for 1837, PP 1837 XLIV 731; 1842, see local county asylum reports; 1847, LC Further Report; 1852 and 1857 LC 11th AR; 1860, LC 13th AR.

TABLE 4

Voting on Layard's proposals for reform of the Civil Service	Kent M.P.s		Surrey M.P.s	
	For	Against	For	Against
Against the non promotion of non commissioned officers	2	6	5	1
Sel Comm into system of purchasing appointments	1	3	3	3
Sel Comm into Medical Depts	5	2	3	2
Sel Comm on how Indian army should be available for war in Europe	1	7	4	6
Revision of diplomatic establishments	9	1	4	2
Administrative reform needed	2	11	5	5
Competition should be open	3	3	5	2

Source: PP 1854-5 XIV, pp.17-37.

TABLE 5

POLITICAL AFFILIATIONS OF COUNTY ASYLUM VISITORS

Surrey		Kent	
Adams	Conservative	Akers	Conservative
Alcock	Liberal	Alkin	Conservative
Alsager	Conservative	Armytage	Conservative
Austen	Liberal	Baldwin	Liberal
Baggallay	Conservative	Brecknock	Liberal
Barclay	Conservative	Burton	Conservative
Barclay	Conservative	Cobb	Conservative
Best	Liberal	Dalison	Conservative
Briscoe	Liberal	Deedes	Conservative
Challoner	Liberal	Douglas	Conservative
Crawford	Whig	Hepburn	Lib/Con
Cubbitt	Conservative	Hodges	Whig
Denison	Whig	Holmesdale	Conservative
Drummond	Conservative	Jacobsen	Whig
Edgell	Liberal	Knatchbull	Conservative
Freshfield	Conservative	Knatchbull	Conservative
Gosse	Liberal	Lushington	Conservative
Goulburn	Conservative	Marsham	Conservative
Hawes	Reformer	Marsham	Conservative
Kemble	Conservative	Moore	Conservative
Hope	Conservative	Nicholson	Conservative
Lovelace, Earl	Liberal	Petley	Conservative
Lovaine	Conservative	Plumptre	Conservative
Parratt	Liberal	Pott	Conservative
Nicholson	Conservative	Stapleton	Conservative
Penrhyn	Conservative	Savage	Conservative
Roberts	Conservative	Wigan	Conservative
Schuster	Liberal		

Details extracted from county and borough poll books for both counties, and also from Dodd's Parliamentary Companion.

TABLE 6

ANALYSIS OF STAFF STABILITY AT SURREY 1841-59

Hired	Av length of stay		Av length of stay		Av length of stay	
1841	3 yrs	3 mnths	1842	3 yrs 10 mnths	1843	2 yrs 10 mnths
1844	2 yrs	0 mnths	1845	2 yrs 3 mnths	1846	3 yrs 6 mnths
1847	5 yrs	6 mnths	1848	5 yrs 4 mnths	1849	3 yrs 2 mnths
1850	2 yrs	11 mnths	1851	4 yrs 11 mnths	1852	2 yrs 1 mnths
1853	3 yrs	1 mnths	1854	1 yrs 11 mnths	1855	1 yrs 8 mnths
1856	1 yrs	5 mnths	1857	1 yrs 8 mnths	1858	1 yrs 2 mnths
1859	1 yrs	3 mnths				

Nos. Hired: 1841 - 20, 1842 - 11, 1843 - 8, 1844 - 12, 1845 - 12,

Nos. Hired: 1846 - 8, 1847 - 7, 1848 - 9, 1849 - 28, 1850 - 18,

Nos. Hired: 1851 - 9, 1852 - 10, 1853 - 12, 1854 - 13, 1855 - 10,

Nos. Hired: 1856 - 14, 1857 - 15, 1858 - 27, 1859 - 52.

Source: Springfield Hospital Archives, Servants Wages Book 1841-63.

TABLE 7

Cure and Death rates on average number resident

	Cures		Deaths	
	Surrey	Kent	Surrey	Kent
1837	-	6.3%	-	11.4%
1840	-	7.7%	-	5.6%
1843	10.6%	9.8%	12.2%	14.6%
1846	5.2%	8.5%	12.5%	-
1849	5.0%	9.6%	8.2%	10.5%
1852	14.1%	15.5%	14.3%	13.7%
1855	15.8%	12.4%	12.7%	14.8%
1858	7.0%	10.9%	10.1%	10.6%
1861	7.7%	10.3%	12.6%	13.6%

To some extent the early figures in both asylums reflect the initial intake of mostly chronic patients.

Surrey 4224 admissions 1841-60

Kent 3239 admissions 1833-60

1385 deaths	32.7%	1102 deaths	34.0%
1415 cured	33.4%	1065 cured	32.8%
480 discharged uncured	11.3%	452 discharged uncured	13.9%

Source: County Asylum Reports; Also Kent CRO, Q/GC1/1, Reports and Proceedings of the Asylum Committee, for period before 1847.

TABLE 8

COUNTY ASYLUM STAFF/PATIENT RATIOS

	Surrey			Kent		
	Staff	Patients	Ratios	Staff	Patients	Ratios
1841	-	-	- - -	12	188	1 to 16
1843	18	363	1 to 20	-	-	- - -
1846	20	402	1 to 20	22	317	1 to 14
1849	44	701	1 to 16	-	-	- - -
1852	48	884	1 to 18	36	646	1 to 18
1857	51	951	1 to 19	-	-	- - -
1861	60	942	1 to 16	34	598	1 to 18

Source: County Asylum Reports for the above period.

TABLE 9

KENT COUNTY ASYLUM MALE AND FEMALE STAFF1876-1880

Hired from 1 Mar each year			With Rel working in				With Rel working in	
	Male	Av Age	From Kent	Asylum already	Female	Av Age	From Kent	Asylum already
1876-1877	44	29.6	73.9%	11.3%	59	22.9	52.6%	6.7%
1877-1878	44	27.5	73.0%	9.0%	50	22.3	42.8%	18.0%
1878-1879	39	27.9	59.2%	7.6%	44	24.0	37.1%	4.5%
1879-1880	24	27.0	66.0%	4.1%	62	22.8	53.4%	16.1%
Total	151	28.1	69.1%	8.6%	215	23.0	47.0%	11.6%

TABLE 10

MALE ATTENDANTS

	% who had nursed in asylum before		Av length of service in other asylums	Av length of service at Kent	Marital Status			
					M	S	W	Unkwn
1876-1877	13	(29.5%)	10 months	40 months	15	25	0	4
1877-1878	6	(13.6%)	16 months	27 months	10	30	2	2
1878-1879	7	(17.9%)	8 months	13 months	5	33	1	0
1879-1880	4	(16.6%)	7 months	21 months	5	19	0	0
Total	30	(19.8%)	10 months	25 months	35	107	3	6

Source: For Tables 9 and 10, Kent CRO, MH/Md2/As6 and As7, Servants Records.

TABLE 11

FEMALE ATTENDANTS

	% who had nursed in asylum before		Av length of service in other asylums	Av length of service at Kent	Marital Status			
					M	S	W	Unkwn
1876-1877	24	(40.6%)	17 months	18 months	6	47	3	3
1877-1878	12	(24.0%)	22 months	15 months	1	47	2	0
1878-1879	24	(54.5%)	18 months	17 months	1	42	1	0
1879-1880	26	(41.9%)	16 months	19 months	1	54	3	4
Total	86	(40.0%)	18 months	17 months	9	190	9	7

TABLE 12

MALE ATTENDANTS' PREVIOUS OCCUPATIONS

	1876/7	1877/8	1878/9	1879/80
Army/Navy/Militia	21	24	22	11
Asylum work	13	6	7	4
Labouring family	5	6	2	6
Police	2	0	1	1
In Service	2	2	2	2
Oil Mills	1	0	0	0
Railways	0	2	1	0
Hospital Nurse	0	1	0	0
Paper Mills	0	1	0	0
Musician	0	0	3	0
Gunpowder Maker	0	0	0	0

TABLE 13

FEMALE ATTENDANTS' PREVIOUS OCCUPATIONS

	1876/7	1877/8	1878/9	1879/80
Asylum work	24	12	24	26
Domestic Service	10	8	9	15
Hospital work	0	6	2	5
Neddlework/machining	0	3	0	0
Convict service	0	0	1	0
Local trade	0	0	2	0
No details	25	21	6	16

Source: For Tables 11 to 13, Kent CRO, MH/Md/As6 and As7, Servants Records.

TABLE 14

REASONS FOR LEAVING

MALES

	1876/7	1877/8	1878/9	1879/80	
Fired for neglect/cruelty	7	9	2	4	22
Fired for drunkenness	11	5	8	5	29
Better chance elsewhere	5	2	2	2	11
Didn't like the work	4	2	3	1	10
Fired due to sexual relations with nurses	4	2	4	0	10
Fired for fighting/quarreling	3	0	0	1	4
Left because bullied	2	0	0	0	2
Died	2	0	0	0	2
Useless, inefficient, scared of patients	0	6	3	3	12
Dishonesty	0	1	2	1	4
Ill	0	1	1	1	3
To help care for a family member	0	2	1	0	3
Restrictions of asylum life conditions	0	0	5	1	6
Return to the Forces	0	2	0	0	2
Unknown	6	2	8	5	21

REASONS FOR LEAVING

FEMALES

	1876/7	1877/8	1878/9	1879/80	
Fired for neglect/cruelty/drinking	7	6	4	8	25
Better chance elsewhere	2	0	0	3	5
Didn't like the work	4	3	0	0	7
Fired for sexual relations with male staff	0	3	1	5	9
Fired for fighting/quarreling	4	0	0	1	5
Died	0	1	0	0	1
Useless, too weak, scared of patients	9	5	6	13	33
Dishonesty	0	0	0	3	3
Left because ill or pregnant	14	11	10	5	40
To help care for a family member	2	3	3	2	10
Restrictions of asylum life	7	0	2	3	12
Just wanted a change	0	8	0	0	8
Rudeness to Matron/insubordination	0	1	0	2	3
To marry	0	6	7	2	15
Unknown	10	3	11	15	39

Source: Kent CRO, MH/Md/As6 and As7, Servants Recors.

TABLE 15

AVERAGE LENGTH OF STAY FOR PATIENTS AT WEST MALLING,
GREAT FOSTERS, AND LEA PALE

Lea Pale	1812-1827	17 months	Information on Great Fosters and Lea Pale taken from the private asylum minute books and reports 1774-1845, from the Entry Book for Great Fosters 1790-1851 and from miscellaneous returns. Refs Surrey CRO, QS5/5/3, 4, 5, and 6; Qs5/6.
	1828-1845	13 months	
	1845-1851	4½ months	
Great Fosters	1788-1827	39 months	
	1828-1845	15 months	
	1845-1851	5 months	
West Malling	1820-1828	101 months	Information on West Malling from Q/Alp/5, 6, 7, 8, 9 and 10. A Register of patients and files of certificates returned.
	1828-1845	14 months	
	1845-1851	-----	

TABLE 16

DISCHARGE OF PATIENTS ADMITTED TO WEST MALLING 1828-1845

Total: 329 (213 private and 112 pauper)

Length of stay	0-3 months:	118	1-2 years:	27	incurable:	11
	3-6 months:	63	2-5 years:	28	no details:	29
	6-12 months:	38	over 5 years:	15		

		Private		Pauper		
0-3 months	Cured	45	54.2%	11	31.4%	65.5% of all admissions were private, yet of 118 discharged in 0-3 months 70.3% were private.
	Died	17	20.4%	6	17.1%	
	Disch Uncured	20	24.0%	18	51.4%	
	Escaped	1				
	Total	83		35		
3-6 months	Cured	24	58.5%	12	54.5%	49.2% of private patients were discharged within 6 months, but only 40.1% of paupers.
	Died	2	4.8%	6	27.2%	
	Disch Uncured	15	36.5%	4	18.1%	
	Total	41		22		
6-12 months	Cured	16	59.2%	4	36.3%	61.0% of private patients were discharged within 1 year, but only 44.6% of paupers
	Died	2	7.4%	6	54.5%	
	Disch Uncured	8	29.6%	1	9.0%	
	Escaped	1				
	Total	27		11		

Source: Kent CRO, Q/Alp/5 and 11, Register of Patients admitted to West Malling Asylum, and Miscellaneous Papers.

TABLE 17

METROPOLITAN LICENSED HOUSES
DEATHS AGAINST AVERAGE ASYLUM POPULATION
AT THE END OF THE YEAR

Each entry shows the number of deaths in total and as a percentage

	Peckham		Althorpe		Sleaford		Clapham		Dartmouth	
1832-3	54	26.8%	2	20.0%	3	33.3%	0	0.0%	0	0.0%
1833-4	31	14.2%	2	18.1%	0	0.0%	1	7.6%	1	20.0%
1834-5	47	18.3%	0	0.0%	1	11.1%	0	0.0%	0	0.0%
1835-6	49	17.2%	1	9.0%	0	0.0%	1	6.2%	2	25.0%
1836-7	58	20.5%	2	10.5%	2	15.3%	4	26.6%	3	42.8%
1837-8	32	10.7%	5	31.2%	0	0.0%	4	28.5%	1	14.2%
1838-9	38	12.8%	3	25.0%	0	0.0%	1	5.5%	0	0.0%

For comparison:

	Hoxton		Holly		Red/White		Whitmore		Pembroke	
1832-3	41	18.6%	30	45.0%	67	13.4%	3	5.6%	3	5.5%
1833-4	30	13.6%	9	12.1%	56	11.9%	2	3.7%	2	2.5%
1834-5	41	16.0%	11	14.6%	82	17.1%	6	12.7%	3	3.7%
1835-6	60	21.0%	7	9.0%	93	17.8%	4	8.3%	5	6.1%
1836-7	97	28.6%	21	28.0%	107	21.0%	4	9.3%	2	2.5%
1837-8	96	27.7%	House		108	18.6%	2	4.5%	4	4.8%
1838-9	78	26.7%	Closed		109	19.1%	0	0.0%	3	3.7%

Average daily population for each of the above between 1832 and 1839

Peckham	262	Althorpe	13	Sleaford	11	Clapham	15
Dartmouth	6	Hoxton	280	Holly	97	Red/White	517
Whitmore	48	Pembroke	76				

Source: Paper on insanity given by Colonel Sykes to the Statistical Society in 1841.

TABLE 18

DISCHARGES AGAINST AVERAGE ASYLUM POPULATION
AT THE END OF THE YEAR

From 1832-34 the number of cures and then the number of discharges (relieved/incurable) are given for each asylum, followed by the percentage figure for all those discharged. Thereafter the discharges are given as one figure. This is owing to the tables available.

	Peckham			Althorpe			Sleaford			Clapham			Dartmouth		
1832	16	32	23.8%	1	4	50.0%	2	3	55.5%	1	4	35.7%	0	0	0.0%
1833	26	34	27.6%	1	4	45.4%	2	5	87.5%	1	8	39.1%	0	1	33.3%
1834	58		22.6%	5	38.4%		4	44.4%		6	37.5%		4	100.0%	
1835	103		36.2%	4	36.3%		6	40.0%		8	50.0%		2	25.0%	
1836	84		29.7%	2	10.5%		5	38.4%		10	66.6%		1	14.2%	
1837	78		26.1%	8	50.0%		6	50.0%		8	57.1%		1	14.2%	
1838	76		25.7%	8	66.6%		2	15.3%		4	22.2%		0	0.0%	

For comparison

Hoxton				Holly			Red/White			Whitmore			Pembroke		
1832	8	57	29.5%	13	39	78.7%	50	80	26.0%	2	3	9.4%	2	3	9.2%
1833	37	55	41.8%	16	28	59.4%	50	80	27.8%	4	5	16.6%	3	5	10.2%
1834	115		44.9%	30	40.0%		171	35.8%		5	10.6%		5	6.2%	
1835	119		41.7%	30	38.9%		190	36.5%		3	6.2%		3	3.7%	
1836	143		42.1%	House			217	42.6%		9	20.9%		8	10.2%	
1837	164		47.3%	Closed			223	38.5%		3	6.8%		4	4.8%	
1838	241		82.5%				264	46.3%		13	28.2%		9	11.3%	

Source: See source for Table 17.

TABLE 19

DEATHS AGAINST AVERAGE POPULATION DURING EACH YEAR
AT PECKHAM, CAMBERWELL, EFFRA AND YORK HOUSE 1849-53

	Peckham			Camberwell			Effra			York House		
	Deaths	Av Pop	%	Deaths	Av Pop	%	Deaths	Av Pop	%	Deaths	Av Pop	%
1849	104	479	21.7%	55	319	17.2%	1 *	16	6.2%	1	20	5.0%
1850	50	477	10.4%	38	325	11.6%	5 *	17	29.4%	2	16	12.5%
1851	31	416	7.4%	42	316	13.2%	1	16	6.2%	1	18	5.5%
1852	34	271	12.5%	35	299	11.7%	1	20	5.0%	2	19	10.5%
1853	52	283	18.3%	43	308	13.9%	1	23	4.3%	-	21	0.0%

Source: LC 8th AR, 1854, pp.265-78

TABLE 20

RECOVERIES AND REMOVALS AT PECKHAM, CAMBERWELL, EFFRA
AND YORK HOUSE 1849-53 AND THE OVERALL % DISCHARGED ON THE
AVERAGE POPULATION EACH YEAR

	Peckham			Camberwell			Effra			York House		
	Removal %			Removal %			Removal %			Removal %		
	Cures	Uncured	Disch	Cur	Uncur	Dis	Cur	Uncur	Dis	Cur	Uncur	Dis
1849	74	123	41.1%	34	83	36.6%	1	1	12.5%	1	4	25.0%
1850	92	37	27.0%	35	44	24.3%	4	4	47.0%	2	2	25.0%
1851	50	224	65.8%	34	126	50.6%	3	2	31.2%	0	3	16.6%
1852	27	60	32.1%	44	56	33.4%	2	4	30.0%	1	4	26.3%
1853	66	83	52.6%	42	76	38.3%	7	9	69.5%	0	4	19.0%

Source: LC 8th AR, 1854, pp.265-78.

TABLE 21

	Peckham				Camberwell			
	Private	% Priv	Pauper	Total	Private	% Priv	Pauper	Total
1847	55	15.5%	354	409	6	2.4%	240	246
1849	57	13.4%	424	481	8	2.4%	313	321
1850	60	12.1%	435	495	11	3.6%	294	305
1851	56	11.8%	417	473	17	5.3%	303	320
1853	46	17.2%	221	267	23	8.0%	263	286
1854	49	17.8%	226	275	33	11.0%	267	300
1855	52	15.2%	289	341	35	11.0%	283	318
1856	45	12.9%	303	348	35	10.7%	290	325
1857/8	49	13.3%	317	366	61	18.6%	266	327

From 1825-1838³ 27.7% of Peckham's patients were private.
 From 1839-1843³ 19.3% of Peckham's patients were private.

Source: LC Further Report 1847, and LC 4th to 11th Annual Reports.

TABLE 22

CAMBERWELL HOUSE PATIENTS' STATISTICSHEALTH ON ADMISSION

	1846	1847	1848	1850	1852	1850-52
Precarious/v. precarious	2	29	13	6	6	0
Debilitated/delicate	29	38	44	11	1	
Emaciated/exhausted	7	28	-	11	25	11
General condition feeble	-	34	28	15	4	1
Unhealthy/sickly	-	7	-	-	2	
Total expressed as a % of admissions	23.8%	62.3%	74.5%	35.2%	31.5%	26.0%

Source: The sources for this Table and also Tables 23-25, are three Casebooks for Camberwell House. Vol 1 is at the Royal College of Psychiatrists. The other two are held at the Wellcome: Acc. No. 334939, Press Mark 6648, Vol 2, 31 Oct 1847 - 5 May 1850, Patient Nos.442-889; Acc. No. 334939, Press Mark 6649, Vol 3, 10 May 1850 - 22 Jun 1853, Patient Nos.890-1355.

TABLE 23

BREAKDOWN OF THE HEALTH FIGURES AT CAMBERWELL

	Pauper patients				Private Patients
	1846	1847	1848	1850	1850-52
Ulcers/skin eruptions/boils					
scabies/strumous inflammation	21	35	12	15	5
Hernias	0	7	2	0	1
Phthisis	0	0	4	1	1
Severe bruising	0	5	3	1	0
Chronic bronchitis	1	2	0	1	1
Heart/renal failure	0	2	1	3	3
Gangrene	0	3	1	0	0
Gonorrhoea	0	1	1	0	0
Very dirty	0	0	2	1	3
Arthritis/rheumatism	0	1	1	0	1

These statistics only reflect what was recorded in the medical casebooks, but as that was not done systematically, there were almost certainly more patients with chronic health problems.

TABLE 24

VIOLENCE AT CAMBERWELL HOUSE

	1846	1847	1848	1850	1852	Private Patients 1850-53
violent/very violent	13	19	5	20	16	7
dangerous	13	29	7	11	19	2
suicidal and dangerous	10	13	11	6	4	-
suicidal	14	26	13	12	8	6
incoherent/excited/rav	14	7	14	-	9	1
abusive and noisy	5	5	3	12	19	7
irritable/quarrelsome	8	2	9	4	2	3
fitting severely	8	12	3	7	6	4
at times excited/spiteful	0	12	4	0	11	1
Total	85	125	69	72	94	31
Total expressed as a % of admissions that year	53.4%	57.3%	60.5%	59.0%	70.6%	55.3%

Many patients fall into more than one category and I have tried to chose the one for which they are most commonly noted during admission.

TABLE 25

WHERE PATIENTS AT CAMBERWELL HOUSE ORIGINATED FROM

Only the statistics of those patients whose origins were recorded have been considered.

	1846		1847		1848		1850		1852	
	No of Patients		No of Patients		No of Patients		No of Patients		No of Patients	
London/Middsx	54	42.8%	29	17.6%	19	25.3%	23	38.3%	26	41.2%
Home Counties	35	27.7%	78	47.5%	41	54.6%	27	45.0%	26	41.2%
North/Midlands	36	28.5%	57	34.7%	15	20.0%	9	15.0%	9	14.2%
West'n Counties	1	0.7%	0	0.0%	0	0.0%	1	1.6%	2	3.1%

TABLE 26

STAFF/PATIENT RATIOS

	Althorpe	Peckham	Dartmouth/Timberham	Clapham	York	Camberwell
1841	1:5	1:22.3	1:4.5	-----	-----	-----
1851	1:2	1:14.0	1:3.6	1:2.8	1: 3.6	1:16.0
1861	---	1:11.1	1:2.0	1:2.5	-----	1:12.2
1871	---	-----	-----	1:2.0	-----	-----

	Great Fosters	Effra	Lea Pale
1851	1:2.2	1:5.0	1:2.0
1861	1:2.0	1:7.3	1:4.0
1871		1:5.6	

These figures are extracted from the census returns. At times it is not clear whether staff were attendants or not, but I have only entered staff as nurses when they were referred to as such. These figures do not therefore include matrons, doctors or house servants.

TABLE 27

PLACEMENT OF PATIENTS IN KENT

Maidstone					Greenwich				
	Co Asy	Lic Hse	Wkhse	Lodgings	Co Asy	Lic Hse	Wkhse	Lodgings	
1848	71%	0%	27%	2%	17%	32%	33%	18%	
1854	60%	0%	32%	8%	55%	0%	37%	8%	
1860	42%	0%	54%	4%	77%	0%	21%	2%	

Sevenoaks					Eastry				
	Co Asy	Lic Hse	Wkhse	Lodgings	Co Asy	Lic Hse	Wkhse	Lodgings	
1848	55%	5%	21%	19%	14%	27%	32%	27%	
1854	56%	0%	8%	36%	17%	20%	37%	26%	
1860	67%	0%	12%	21%	26%	20%	25%	29%	

Medway					Tonbridge				
	Co Asy	Lic Hse	Wkhse	Lodgings	Co Asy	Lic Hse	Wkhse	Lodgings	
1848	43%	27%	22%	8%	67%	0%	4%	29%	
1854	63%	0%	33%	4%	66%	0%	25%	9%	
1860	49%	9%	42%	0%	53%	0%	36%	11%	

Thanet					Dartford				
	Co Asy	Lic Hse	Wkhse	Lodgings	Co Asy	Lic Hse	Wkhse	Lodgings	
1848	27%	22%	38%	13% ^a	77%	0%	10%	13%	
1854	21%	53%	23%	3% ^a	91%	0%	9%	0%	
1860	19%	35%	23%	23%	82%	0%	18%	0%	

Figures are available for the other Kent Unions but they only had small numbers of patients.

Source: Kent County Asylum Annual Reports, 1848, 1854 and 1860.

TABLE 28

VISITATIONS TO THE KENT AND SURREY WORKHOUSES 1845-60

	Kent	Surrey
Visited x7	Eastry Greenwich Maidstone Malling Medway Thanet	Bermondsey Chertsey Guildford Lambeth (x8) St Olaves
x6	Cranbrook Dover Faversham Gravesend/Milton Hollingbourne Hoo Milton Tonbridge Canterbury	Croyden Dorking Epsom Kingston Wandsworth and Clapham
x5	Ashford West Blean Bridge Dartford Elham Lewisham North Aylesford Romney Marsh Sevenoaks Tenterden	Camberwell Hambleton Richmond Reigate
x4	Ashford East Bromley	Farnham Rotherhithe St Mary Newington St Saviours St George the Martyr Southwark

Source: LC Annual Reports 1845-1860.

TABLE 29

CHANCERY PATIENTS CONNECTED WITH
KENT AND SURREY 1817-1860

	Male	Female	Total	
1817 - 1833	24	18	42	
1833 - 1845	33	14	47	(14.6% increase)
1845 - 1860	55	52	107	(127.6% increase)

Source: These figures are extracted from the Chancery Register of Bonds (PRO/J103) and include all those from Surrey and Kent who were placed in the county or outside it. Of these 196 patients, 155 (79%) were placed in Kent and Surrey. There were also a further 27 patients from other counties who were placed in Kent and Surrey.

The figures for Table 30 come from the same source.

TABLE 30

FURTHER BREAKDOWN OF THE CHANCERY FIGURES

Kent and Surrey patients placed in their own counties

	Lodgings/Home		Asylums		
	Male	Female	Male	Female	
1817 - 1833	11	15	6	2	
1833 - 1845	15	11	8	1	
1845 - 1860	24	25	21	16	
Total	101		54		155

Kent and Surrey patients placed outside their own counties

	Lodgings/Home		Asylums		
	Male	Female	Male	Female	
1817 - 1833	1	0	6	1	
1833 - 1845	1	0	9	2	
1845 - 1860	2	2	8	9	
Total	6		35		41

TABLE 30 cont.

Outsiders placed in Kent and Surrey

	Lodgings/Home		Asylums		
	Male	Female	Male	Female	
1817 - 1833	1	0	2	1	
1833 - 1845	3	2	4	0	
1845 - 1860	4	4	4	2	
Total		14		13	27

TABLE 31

KENT PAUPER LUNATICS

	Lodgings		Friends		Total		Overall Total
	Male	Female	Male	Female	Male	Female	Male and Female
1849	6	5	38	41	44	46	90
1850	2	1	48	46	50	47	97
1851	2	1	42	49	44	50	94
1852	1	1	40	53	41	54	95
1853	1	1	32	46	33	47	80
1853	1	1	31	45	32	46	78
1854	4	5	41	53	45	58	103
1855	1	5	38	55	39	60	99
1856	1	4	37	52	38	56	94
1857	1	3	40	45	41	48	89
1858	-	-	-	-	35	55	90
1859	-	-	-	-	33	52	85
1860	-	-	-	-	41	57	98

Source: Kent County Asylum Reports, 1849-1860. After 1857 the lodgings and friends figures were amalgamated in the Returns reported in the County Asylum Reports

APPENDIX A

From 1828-1845 24 M.P.s were appointed to the Metropolitan Lunacy Commission, 12 magistrates, 10 doctors and 5 lawyers. There were also two secretaries. The following lists their length of service.

MEMBERS OF PARLIAMENT

Lord Granville Somerset	1828-1831	C	Chairman 1828-1831
Ashley 7th Earl of Shaftesbury	< 1828-1845	C	Chairman 1832-1845
T B Lennard	1828-1829	R	
C N Pallmer	1828-1829	C	
Lord R Seymour	1828-1829	C	
W Ward	1828-1830	C	
F G Calthorpe	1828-1831	C	
G H Rose	1828-1831	C	
F Baring	1828-1832	W	
B Bouverie	1828-1832	C	
G Byng	1828-1832	W	
C Ross	1828-1832	C	
C W W Wynn	1828-1832	C	
R Gordon	< 1828-1845	W	
J E Dowdeswell	1830-1831	W	
T F Freemantle	1830-1831	C	
S Perceval	1830-1831	C	
R Vernon Smith Baron Lyveden	< 1830-1845	W	
Sir G Grey	1833-1834	W	
Sir R H Inglis	1833-1835	C	
J Abel Smith	1835-1841	W	
Lord E A Seymour	< 1836-1845	W	
J Barneby	1839-1845	C	
J M Gaskell	1839-1845	C	

<	Became a lay Lunacy Commissioner in 1845
C	Conservative
W	Whig
R	Reformer

MAGISTRATES

Sir G F Hampson	1828-1832
Colonel Clitherow	1828-1838
Reverend A M Campbell	1830-1832
Reverend G Shepherd	a 1830-1838
C Clive	. 1833-1834
G Acklom	1833-1837
E S Halswell	1833-1837
Colonel W H Sykes	1835-1845
Lieutenant Colonel E Clive	1836-1841
Captain H Jelf Sharp	1838-1841
Sir W R Farquhar	1839-1841
J R Gowen	1842-1845

DOCTORS

T Drever	1828-1829
J Bright	01828-1845
J R Hume	*1828-1845
H H Southey	01828-1845
T Turner	*1828-1845
E J Seymour	1830-1838
C Hewett	1839-1840
T Waterfield	1841-1845
F Bisset Hawkins	1842-1845
J C Prichard	*1842-1845

LAWYERS

J W Mylne	*1832-1845
B W Procter	*1832-1845
F Barlow	*1841-1845
J H Hall	*1842-1845
R W S Lutwidge	+1842-1845

SECRETARIES

R Browne	1828-1833
E Dubois	1834-1845

- * Became a Lunacy Commissioner in 1845
- 0 Became a Lord Chancellor's Medical Visitor in Lunacy in 1845
- + Became Secretary to the Lunacy Commission in 1845

APPENDIX B

CHANGING COMPOSITION OF THE METROPOLITAN LUNACY COMMISSION

NON-PROFESSIONALS				PROFESSIONALS			
1828	-	14 M.P.s	2 Magistrates (16)	5 Doctors	0 Lawyers	(5)	
1829	-	14 M.P.s	2 Magistrates (16)	5 Doctors	0 Lawyers	(5)	
1830	-	15 M.P.s	4 Magistrates (19)	5 Doctors	0 Lawyers	(5)	
1831	-	14 M.P.s	4 Magistrates (18)	5 Doctors	0 Lawyers	(5)	
1832	-	8 M.P.s	4 Magistrates (12)	5 Doctors	2 Lawyers	(7)	
1833	-	5 M.P.s	5 Magistrates (10)	5 Doctors	2 Lawyers	(7)	
1834	-	5 M.P.s	5 Magistrates (10)	5 Doctors	2 Lawyers	(7)	
1835	-	5 M.P.s	5 Magistrates (10)	5 Doctors	2 Lawyers	(7)	
1836	-	5 M.P.s	6 Magistrates (11)	5 Doctors	2 Lawyers	(7)	
1837	-	5 M.P.s	6 Magistrates (11)	5 Doctors	2 Lawyers	(7)	
1838	-	5 M.P.s	6 Magistrates (11)	5 Doctors	2 Lawyers	(7)	
1839	-	7 M.P.s	5 Magistrates (12)	5 Doctors	2 Lawyers	(7)	
1840	-	7 M.P.s	5 Magistrates (12)	5 Doctors	2 Lawyers	(7)	
1841	-	7 M.P.s	4 Magistrates (11)	5 Doctors	3 Lawyers	(8)	
1842	-	6 M.P.s	2 Magistrates (8)	7 Doctors	5 Lawyers	(12)	
1843	-	6 M.P.s	2 Magistrates (8)	7 Doctors	5 Lawyers	(12)	
1844	-	6 M.P.s	2 Magistrates (8)	7 Doctors	5 Lawyers	(12)	
1845	-	6 M.P.s	2 Magistrates (8)	7 Doctors	5 Lawyers	(12)	

APPENDIX C

BIOGRAPHICAL DETAILS OF THE METROPOLITAN LUNACY COMMISSIONERS

MEMBERS OF PARLIAMENT IN ORDER OF APPOINTMENT

Lord Granville Charles Henry Somerset (1792-1848) Educ. Christ Church Oxford, BA 1813. Second son of the Duke of Beaufort. Conservative, M.P. Monmouthshire 1816-48. Junior Lord of the Treasury, with intermissions, 1819-1830. Privy Councillor, Commissioner of Woods and Forests 1834-35, Chancellor of the Duchy of Lancaster 1841-46. Supported Repeal of the Corn Laws. A keen sportsman. Member of the Carlton Club. Sat on the Select Committee into Lunacy in 1827. A chief election manager for the Conservatives. Member of the Select Committee on the State of English railways 1839. (DNB; Stenton, Who's Who of British Members of Parliament Vol 1 1832-85. Quoted hereafter as Who's Who; Boase.)

Lord Ashley (1801-85) See Appendix D.

Thomas Barrett Lennard (1788-1856) Educ. Charterhouse and Jesus College Cambridge, BA 1810. Son of Lord Dacre. Reformer, M.P. Ipswich 1820-26, Maldon 1826-37 and 1847-52. In favour of the abolition of slavery. Owner of large estates in County Monaghan. (Who's Who; Boase)

abolition of slavery. Owner of large estates in County Monaghan.
(Who's Who; Boase)

Charles Nicholas Palmer (No birth dates obtained) Educ. Oxford, DCL 1817 High Tory M.P. Ludgershall 1815-17, Surrey 1826-30. Surrey Madhouse Visitor 1824 and 1825. (Alumni Oxonienses)

Lord Robert Seymour (1767-1830) Sat on Select Committee into Lunacy in 1815. Visiting Magistrate to the Middlesex County Asylum at Hanwell 1827-29. (Jones, Lunacy, Law and Conscience; PP 1826-27 VI Letter from Seymour to the 1827 Select Committee on Lunatics.)

William Ward (No birth dates obtained) Conservative M.P. for City of Westminster 1831. Turned out by his own electors because he was not for reform. (Boase.)

Frederick Gough Calthorpe (1790-1868) Educ. Christ Church Oxford, BA 1808. Was the 4th Lord Calthorpe. Conservative, M.P. Hindon 1818-26, Bramber 1826-31. A confirmed evangelical. Sat on the Select Committee into Lunacy 1827. (Alumni Oxonienses;))

George Henry Rose (1771-1855) Educ. St John's Cambridge, BA 1792. A Diplomatist. 1792-93 1st secretary to British Embassy at the Hague. 1793 1st secretary to the Charge d'affairs in Berlin. 1807 Minister in Washington, 1813 British Minister in Munich, 1815 in Berlin. 1818 Privy Councillor. Conservative, M.P. Southampton 1794-1813, Christchurch Hampshire 1818-44. Deputy Lieutenant Hampshire. A confirmed evangelical. Sat on Select Committee into Lunacy in 1807, 1815 and 1827. (DNB; Who's Who;

Francis Thornhill Baring, Lord Northbrook (1796-1866) Educ. Winchester and Christ Church Oxford, BA 1817. Whig/Liberal, M.P. Portsmouth 1826-65. Lord of the Treasury 1830-34, Secretary to the Treasury 1835-39, Chancellor of the Exchequer 1839-41, First Lord of the Admiralty 1849-52. Evangelical non conformist. Sat on the Select Committee into Lunacy in 1827. (DNB; Who's Who; Northbrook, Journals and Correspondence of Francis Thornhill Baring.)

Bartholomew Bouverie (1754-1835) Educ. University College Oxford, BA 1772. Son of the Earl of Radford. Conservative, M.P. Downton (1812-35). A confirmed evangelical. Visiting Magistrate to the Middlesex County Asylum at Hanwell. (Alumni Oxonienses.)

George Byng, Viscount Enfield and Earl of Strafford (1764-1847) Great grand son of Admiral Byng and Viscount Torrington, brother to the Earl of Strafford. Whig, M.P. Middlesex County 1790-1847. Father of the House of Commons. Visiting Magistrate to the Middlesex County Asylum at Hanwell. (DNB; Who's Who)

Charles Ross (1768-1860) Conservative, M.P. St Germans³ Cornwall 1826-32, Northampton 1832-37. Lord of the Treasury 1834-35. A Lord of the Admiralty. Member of the Carlton and Athenaeum. A West Indian Proprietor. (DNB; Who's Who)

Charles Watkin Williams Wynn (1775-1850) Educ. Westminster and Christ Church Oxford, BA 1795. Son of the 4th Baronet of Wynnstay. Conservative, M.P. South Montgomeryshire 1797-1850. Close friend and patron of Robert Southey. Admitted L.I. 1795. 1806-07 Under-

Secretary of State for the Home Department. 1822-28 President of the Board of Control. Member of the Privy Council. Had leanings to the Whigs in later years. 1830-31 Secretary at War. Chancellor of the Duchy of Lancaster 1834-35. Commissioner of Church and Corporation Land Tax. Member of the Athenaeum. Sat on Select Committees into Lunacy in 1807, 1815 and 1827. (Who's Who; DNB)

Robert Gordon (1786-1864) See Appendix D.

John Edmund Dowdeswell (1772-1851) Son of William Dowdeswell, Chancellor of the Exchequer during the Rockingham Administration. Educ. Westminster and Christ Church Oxford, BA 1793. Barrister IT 1796. Recorder for Tewkesbury 1812-33. Whig, M.P. Tewkesbury 1812-32. Commissioner of Bankrupts 1806-20. Master in Chancery 1820-51. Some member of the Dowdeswell family had represented Tewkesbury for many years. (Boase)

Thomas Francis Freemantle (1798-1876) Educ. Oriel College Oxford, BA 1816. Barrister LI 1819. Conservative, M.P. Buckingham 1827-46. Secretary to the Treasury 1834-35 and 1841-44. Secretary for War 1844-45. Chief Secretary for Ireland 1845-46. Chairman Board of Customs 1847-72. Director of the London and Westminster Joint Stock Bank. Member of the Carlton Club. Married into a Buckinghamshire county family. Created Baron Cottesloe 1874. (Alumni Oxonienses; Who's Who)

Spencer Perceval (1795-1859) Educ. Trinity College Cambridge, BA 1814. Eldest son of the assassinated Prime Minister. One of 4 Tellers of the Exchequer by patent 1813-34. Conservative, M.P. Ennis 1818-20, Newport I.O.W. 1827-31, Tiverton 1831-32. From 1826-30 attended Henry Drummond's meetings at Albury Park, and in 1833 was called to be an apostle of the Irvingite or Catholic Apostolic Church. Sat on the Select Committee into Lunatics 1827. (Boase; Cockayne, Complete Peerage)

Robert Vernon Smith, Baron Lyveden (1800-73) See Appendix D.

George Grey (1799-1882) Educ. Oriel College Oxford, BA 1821. Barrister LI 1826. Whig, M.P. Devonport 1832-47, North Northumberland 1847-52, Morpeth 1853-74. Related to the evangelical Samuel Whitbread. Was originally going to take holy orders. Helped in emancipation of the slaves. 1839-41 Judge Advocate General. Home Secretary 1846-52, 1855-58 and 1861-66. After retirement became a country gentleman and philanthropist. Knighted. (DNB)

Robert Harry Inglis (1786-1855) Educ. Winchester and Christ Church Oxford, BA 1806. Barrister LI 1818. Son of an East India Company Director. Conservative, M.P. Dundalk 1824-26, Ripon 1826-28, Oxford University 1829-54. Commissioner Public Records 1831. Opposed to Roman Catholic Relief, Repeal of the Tests and Corporations Act, Parliamentary Reform, the Jewish Relief Bill and to Repeal of the Corn Laws. A convinced evangelical. Member of the United Universities Club. (DNB; Who's Who)

John Abel Smith (1801-71) Educ. Eton and Christ College Cambridge, BA 1824. Chief Partner in Messrs. Smith, Payne and Co. Bankers. Whig/Liberal, M.P. Midhurst 1830-31, Chichester 1831-59 and 1863-68. Supported the Reform Bill and admission of Jews to Parliament.

Member of Brooks Club. J.P. for Middlesex and Sussex. (Who's Who; Alumni Cantabrigienses)

Edward Adolphus Seymour, 12th Duke of Somerset (1804-1885) See Appendix D.

John Barneby (1799-1846) Educ. Christ Church Oxford, BA 1821. Conservative, M.P. Droitwich 1835-37, East Worcs 1837-46. Member of Carlton, Boodles, United Universities and Arthur's Clubs. Spoke in Parliament on the subject of Lunacy in February 1838. (Who's Who; Alumni Oxonienses.)

James Milnes Gaskell (1810-1873) Educ. Eton and Christ Church Oxford. Conservative, M.P. Wenlock 1832-68. Lord of the treasury 1841-46. In favour of electoral reform and religious freedom generally. Member of Carlton and United Universities Clubs. (Boase; Who's Who)

MAGISTRATES

George Francis Hampson (1789-1833) 8th Baronet. From Hertfordshire. Middlesex Magistrate and Visitor to the Middlesex County Asylum at Hanwell. Son of a methodist. (Fosters Peerage; Annual Reports of Middlesex County Asylum.)

James Clitherow (1766-1841) Educ. Christ Church Oxford, BA 1787. All Souls BCL 1791. Colonel in the Middlesex Militia. Governor of Bethlem Hospital 1834-36. Chairman of the Visiting Magistrates to the Middlesex County Asylum at Hanwell 1827-39. Founder of the Queen Adelaide Fund at Hanwell Asylum. (Alumni Oxonienses)

Archibald Montgomery Campbell (1790-1859) Educ. Shrewsbury and St Johns Cambridge, BA 1811. Admitted LI 1812. Rector of Little Steeping Lincs 1818-59, PC of St James Paddington 1829-59, Prebend of St Pauls 1855-59. Secretary to the Society for the propagation of the Gospel and to the Society for the Promotion of Christian Knowledge. (Alumni Cantabrigienses)

George Shepherd (c.1767-1849) Educ. University College Oxford, BA 1788. Rector of St Bartholomews by the Exchange 1807-16. Preacher to the Hon Society of Grays Inn 1817-1849. (Alumni Oxonienses)

George Clive (No dates obtained) From a family in Herefordshire. He knew W R Farquhar and married his sister. Middlesex magistrate. (Burke's Landed Gentry)

George Acklom (No dates obtained) Visiting Magistrate to Middlesex County Asylum at Hanwell 1829-35. (Middlesex County Asylum Reports)

Edmund Storr Halswell (1791-1874) Educ. St John's College Cambridge, BA 1827. Also of Gonville and Caius. Barrister MT 1834. From Radnorshire. Was an Equity Draftsman and Conveyancer. FRS 1834. Kings Counsel for the Duchy of Lancaster 1837-42. Visiting Magistrate to the Middlesex County Asylum at Hanwell 1832-36. Honorary Secretary of the Queen Adelaide Fund at Hanwell. (Alumni Oxonienses)

William Henry Sykes (1790-1872) Naturalist and Soldier from the Yorkshire gentry. Into military service of the East India Company 1803 as a cadet. Lieutenant in 1805. 1810 passed as interpreter of Hindustani and Mahratta languages. 1817-20 in the Deccan. At battles of Kirkee and Poona. 1819 Captain. 1824-26 Statistical work in India. 1826 Major, 1831 Lieutenant Colonel, 1833 Colonel. 1840 elected to Board of Directors. 1856 Chairman of the Company. Liberal, M.P. Aberdeen 1847-72. FRS 1834. One of the Founders of the Statistical Society and its President in 1863. Wrote 45 papers on various subjects including one on lunacy. (DNB; Cullen, The Statistical Movement)

Edward Clive (1782-1845) Captain in Grenadier Guards. Lieutenant Colonel in the Middlesex Militia. Middlesex Magistrate. (Burke's Landed Gentry)

Henry Jelf Sharp (No dates obtained) Visiting Magistrate to the Middlesex County Asylum at Hanwell 1838-41. (Middlesex County Asylum Reports)

Walter Rockcliffe Farquhar (1810-1900) Educ. Eton and University College London. Senior Partner in the bank of Herries, Davidson, Chapman and Co. 1846-1900. Originated scheme of using cathedrals for popular services 1857. Sheriff of Surrey 1859. Active member of the National Society for Promoting Religious Education. (Boase; Bellot, University College, London)

James Robert Gowen (No details found)

DOCTORS

Thomas Drever (1773-1849) Educ. Marischal College Aberdeen. Studied medicine under Dr Livingstone of Aberdeen. MD Edinburgh 1798, Dissertation on pneumonia. Practiced at the spas of Buxton and Macclesfield. L.R.C.P. England 1813. Noted for accurate and patient observation. President of the Medical Society of Aberdeen. Established a Dispensary and a Bathing Institution for the Poor in Buxton. (Anon, Authentic Memoirs... of the most eminent physicians)

John Bright (1783-1870) Educ. Wadham College Oxford, BA 1801 and MD 1808. Practiced at Birmingham, and was appointed Physician to the General Hospital in 1810. F.R.C.P. 1809. Physician to Westminster Hospital 1822-43. Lord Chancellor's Medical Visitor in Lunacy 1841-65) Possessed an ample private fortune. Was noted as a classical scholar and for having venerated a good prescription in Latin or Greek above modern pathological research. (DNB; Monk's Roll)

John Robert Hume (1781-1857) See Appendix D.

Henry Herbert Southey (1784-1865) Younger brother of Robert Southey the poet. From Bristol, studied surgery at Norwich. MD Edinburgh 1806, Dissertation on syphilis. Settled as a physician in Durham 1807-12. L.R.C.P. England 1812, Fellow in 1823. FRS 1825. Physician to Middlesex Hospital 1815-27. Appointed Physician to Queen Adelaide 1823. Lord Chancellor's Medical Visitor in Lunacy 1833-65. Gresham Professor of Medicine 1834-65. Hon. DCL Oxford 1847. Father of Reginald Southey, who was appointed a Medical Lunacy Commissioner

in 1883 and served for six years, before retiring due to a road accident. Author, Observations on Pulmonary Consumption. (DNB; Monk's Roll; Boase; Brown and Traill, Royal College of Physicians....Lives of the Fellows Vol 5;

Thomas Turner (1776-1865) See Appendix D.

Edward James Seymour (1796-1866) Son of an attorney who was a magistrate and deputy lieutenant of Sussex and Chairman of Quarter Sessions. Educ. Jesus College Cambridge, BA 1816 and MD 1826. Studied medicine in London, Edinburgh and Paris. F.R.C.P. England 1827. Physician to St George's Hospital 1828-47, Senior Physician 1847-53. Physician to Dreadnought Hospital Ship Greenwich. Consulting Physician to Greenwich Seamen's Hospital. Physician to the Duke of Sussex 1831-39. FRS 1841. Author, see Bibliography. (Monk's Roll)

Cornwallis Hewett (1787-1841) Son of a wealthy East India Merchant. Educ. Charterhouse and Trinity College Cambridge, BA 1809 and MD 1822. M.R.C.P. England 1822 and Fellow in 1824. Downing Professor of Medicine 1814-1841. Physician to St George's Hospital 1825-33. Physician Extraordinary to William IV 1832. Lord Chancellor's Medical Visitor in Lunacy 1837-1841. (Alumni Cantabrigienses)

Thomas Waterfield (1789-1871) Educ. Christs College Cambridge, MB 1825, MD 1830. F.R.C.P. England 1831. Censor 1832. Senior Physician and Consulting Physician to the Public Dispensary. (Boase)

Francis Bisset Hawkins (1796-1894) Son of a London Surgeon. Educ. Eton and Exeter College Oxford, BA 1818, MB 1822 and MD 1825. F.R.C.P. England 1826. Gulstonian Lecturer 1828, Censor 1830, Lumleian Lecturer 1835. First Professor Materia Medica at King's College London 1830-35. FRS 1834. On the Factory Commission. Prison Inspector. Commissioner for the Government of Pentonville 1847-48. Knew Leonard Horner, Frederick Hill, Chadwick, and Carleton Tuffnell. Member of the London Statistical Society and sat on its Council. Author: Elements of Medical Statistics 1829; History of the Epidemic Spasmodic Cholera in Russia 1831; Germany: the spirit of her history, literature, social condition and national economy 1838. (Boase)

James Cowles Prichard (1786-1848) See Appendix D.

LAWYERS

For all Lawyers see Appendix D.

SECRETARIES

Robert Browne (d.1833) A doctor who was very involved in the Select Committee and legislation of 1827/8. Was found to owe the Metropolitan Lunacy Commission over £440 on his death. Had his knuckles rapped on two occasions for exceeding his orders and issuing letters which he had composed himself. (Calthorpe MSS, 26 m 62, F/C, 1201; PRO/T1/3935)

Edward Dubois (1774-1850) Son of a Swiss merchant. Educ. at home. Barrister LI 1809. Wit and man of letters. Contributor to the Morning Chronicle and Observer. Editor of several magazines. For 20 years was under Serjeant Heath, Judge of the Court of Requests, as his assistant. When the Metropolitan Lunacy Commission was replaced, he remained employed for special duties. A whig appointee, he kept Lord Brougham informed of the Commission's activities. (DNB)

APPENDIX D

THE LUNACY COMMISSIONERS 1845-60

Lunacy Commissioners' and Secretaries' length of service:

Medical Commissioners: J R Hume (1845-57), H H Southey (1845), T Turner (1845-1856), J C Prichard (1845-48), S Gaskell (1848-66), J Wilkes (1856-78), R Nairne (1857-83).

Legal Commissioners: J H Hall (1845), W G Campbell (1845-78), B W Procter (1845-61), J W Mylne (1845-55), R W S Lutwidge (1855-73), J Forster (1861-72).

Secretaries: R W S Lutwidge (1845-55), J Forster (1855-61).

Lay Commissioners: Lord Shaftesbury (chairman) (1845-85), E A Seymour (1845-52), R Gordon (1845-64), R V Smith (1845-72), F Barlow (1845-79), Colonel H M Clifford (1853-84).

BIOGRAPHICAL DETAILS

MEDICAL

John Robert Hume (1781-1857) Educ. St Andrews, MD 1816. L.R.C.P. England 1819 and Fellow 1836. Physician to Wellington in the Peninsular War and on return to England. Inspector General of Hospitals 1818-21. Private practice in London. (DNB; Monk's Roll; Brown and Traill, Lives of the Fellows)

Henry Herbert Southey (1783-1865) See Appendix C.

Thomas Turner (1776-1865) Educ. Chaterhouse and Gottingen, MB Cantab 1799, MD 1804. M.R.C.P. England 1804 and Fellow 1805. Treasurer 1822-45. Physician St Thoams's Hospital 1802-16. Physician Extraordinary to Queen Adelaide 1830-49. Very involved in the affairs of the Royal College of Physicians. This man has frequently been confused with the famous surgeon Thomas Turner, see D.J.Mellet's article on the Lunacy Commissioners. (Monk's Roll; Brown and Traill, Lives of the Fellows; Boase)

James Cowles Prichard (1786-1848) Educ. Edinburgh, MD 1808. Physician to St Peter's Hospital Bristol 1811-1821 and the the Bristol Infirmary 1814-45. Private practice in Bristol. Famous ethnologist and President of the Ethnological Society. FRS 1827. From a Quaker background, Prichard was a committed Christian. Member of the Association of Medical Officers of Asylums and Hospitals for the Insane 1841-45. Author: A Treatise on Diseases of the nervous System, 1822; A Treatise on Insanity and Other Disorders Affecting the Mind, 1835; On the Different Forms of Insanity in Relation to Jurisprudence, 1842. (DNB; Leigh, Historical Development of British Psychiatry for biographical account; Symonds, Some Account of the life, Writings and Character of)

Samuel Gaskell (1807-86) Born Warrington. Educated locally owing to reduced family circumstances. Apprenticed to a Liverpool bookseller for seven years, although several years were remitted. Despite discouragement, due to weak eyes caused by childhood measles, he completed a medical education at Manchester and Edinburgh. Resident MO Stockport Cholera Hospital 1832-34, RMO Manchester Royal Infirmary and Lunatic Asylum 1834-40, Medical Superintendent Lancaster Moor Asylum 1840-48 where he abolished restraint. Noted as a very minute inspector of asylums. Member of the Commission of Inquiry into the State of Lunatic Asylums in Scotland 1857. Retired in 1865 after a street accident and became a recluse. Pioneer in work with the mentally handicapped. Brother-in-law to the novelist Elizabeth Gaskell. (B.M.J. Vol 1, 1886, p.720; Obituary Notice ; Boase; Times 27 Mar 1886; L.M.Sc. Vol 32, 1886, p.235)

James Wilkes (1811-94) LSA 1834, MRCS 1835, FRCS 1854. Studied at the General Hospital Birmingham and King's College London. RMO Staffordshire County Lunatic Asylum 1841-56. Remembered for his involvement in the founding of Coton Hill, Stafford an asylum for the middle classes. Member of the Commission of Inquiry into the State of Lunatic Asylums in Ireland 1856. Honorary Lunacy Commissioner 1878-94. (Boase; Lives of the Fellows of the Royal College of Surgeons; L.M.Sc. Vol 24, 1878, p.321)

Robert Nairne (1804-87) From Strathallan, Perthshire. Educ. Ripon, Edinburgh and Trinity College Cambridge, MB 1832, MD 1837. FRCP 1838. Physician to St George's Hospital 1839-57, an institution with evangelical sympathies. Appointed by Lord Chancellor Cranworth, a governor of the hospital (as were Robert Gordon and Sir George Grey, the Home Secretary). Moderate private practice. Treasurer of the Royal Medical and Chirurgical Society. Member of the deputation of private asylum owners and private practitioners to the Home Secretary in 1853, concerning the lunacy bills. Noted to be, 'reserved, cautious, patient in character, and a stickler for etiquette.....admirably suited to be a government servant.' Honorary Lunacy Commissioner 1883-85. His death was hastened by being knocked down by a cab in London. Son of a missionary, his elder brother Charles became ordained and ended his career as Prebend of Lincoln Cathedral. (Alumni Cantabrigienses; L.M.Sc. Vol 32, p.626; Boase; Brown and Traill, Lives of the Fellows; Monk's Roll)

LEGAL

John Hancock Hall (1797-1845) Eldest son of Revd John Hancock Hall LLB. From Risley Hall, Derbyshire. Educ. Rugby School and Cambridge, LLB 1820 (Civil Law Classes 1st Class 1817-18), Fellow 1822-41. Admitted MT 1817, Barrister 1825. Practised as a Conveyancer living in Essex Court in the Temple. His brother Henry Banks Hall also matriculated at Cambridge and was ordained a Deacon in 1830. Henry went on to succeed his father as Rector of Risley. John died after three months in office as a Lunacy Commissioner. (Alumni Cantabrigienses; Law List 1835; Gentlemen's Magazine, 1845)

William George Campbell (1810-81) Barrister MT 1836. Special Pleader 1838-43, Northern Circuit 1843-45. A protege and nephew of John Douglas Edward Henry Campbell, the 7th Duke and 16th Earl of Argyll, who tried to obtain various posts for him, including taxing master in the court of Bankruptcy, assistant solicitor to the Excise and commissioner in the Excise department. Member of the Commission of Inquiry into Lunatic Asylums in Scotland 1857. A convinced churchman. Honorary Lunacy Commissioner 1878-81. (Boase; Law List 1839, 1841; Peel MSS, 40557, 40562 and 40572; Times 16 Jun 1881)

Bryan Waller Procter (1797-1874) Born Leeds. Educ. Finchley and Harrow. Articled to a solicitor in Calne, Wiltshire. Barrister GI 1831. Mostly practised in conveyancing. Began contributions to the Literary Gazette in 1815. Minor poet, pseudonym Barry Cornwall. Friend of Leigh Hunt, Lamb, Hazlitt, Landor, Carlyle, Swinburne, Coleridge, Macaulay, Dickens and Browning. Honorary Lunacy Commissioner 1861-74. Author: Dramatic Scenes and Other Poems, 1819; Poetical Works, 1822; English Songs, 1832; Memoir of Lamb, 1866. (DNB; Boase; Armour, Barry Cornwall; Martineau, Biographical Sketches; Patmore, Biographical Notes)

James William Mylne (1800-55) (1st son of the Revd James Mylne, professor of moral philosophy at Glasgow University 1797-1839) Educ. Glasgow Grammar, Glasgow University and Balliol College, Oxford, BA 1824, MA 1826. His paternal grandfather was a professor of Ethics at Glasgow, his maternal grandfather a professor of Law at Glasgow and his maternal uncle a professor of Mathematics. Barrister LI 1827. Co-author, with Benjamin Keen, of reports of Cases in the High Court of Chancery 1832-35, 3 Vols, 1834-37; and with R D Craig, Report of Cases in the High Court of Chancery 1835-48, 5 Vols, 1837-48. (Boase; Matriculation Students Glasgow; Alumni Oxonienses; Addison, Snell Exhibitioners p.102.

Robert Wilfred Skeffington Lutwidge (1802-73) Son of the Customs Collector at Hull. His was the junior branch of an established county family in Cumberland. Educ. St John's Cambridge, like his father and brother, BA 1823. Barrister LI, also like his father, called 1827. Auditor of the National Society for Promoting Religious Education 1828-43. A Member of the Statistical Society from its foundation in 1834. Pioneer photographer and favourite uncle of Lewis Carroll. Lutwidge and Carroll shared this interest with Dr Diamond of Surrey County Asylum. Member of the Commission of Enquiry into the State of Lunatic Asylums in Ireland 1856. His brother Charles Henry became ordained, and was rector of East Farleigh in Kent amongst other places. Another brother Skeffington, entered the army and on retirement became a J.P. and Deputy Lieutenant for Cumberland. Robert was killed by a patient whilst visiting Fisherton House Asylum, Salisbury, Wiltshire. (Boase; Alumni Cantabrigienses;

Cohen, The Letters of Lewis Carroll; Lincoln's Inn Admission Register; Law List 1830 and 1839)

John Forster (1812-76) Son of a Newcastle butcher and cattle dealer. Educ. Newcastle Grammar School and University College London. Barrister IT 1843. Drama critic of the True Sun 1832. Also wrote for the Courier and Athenaeum. Appointed chief critic on the Examiner for literature and Drama in 1833. Moved into his well known chambers at 58 Lincoln's Inn Fields in 1834. Editor Foreign Quarterly Review 1842-43; Daily News 1846; Examiner 1847-55. Member of the Shakespeare Society. Prolific writer, who acted as agent for many leading novelists. Moved in Dickens' circle. A close friend of Lord Shaftesbury. Honorary Lunacy Commissioner 1873-76. Winslow recalled him as 'severe and blunt' but 'sympathetic'. Author: Lives of the Statesmen of the Commonwealth, 5 Vols, 1836-39; Life and Adventures of Oliver Goldsmith, 1848; Life of Charles Dickens, 1872. (DNB; Morley, Sketch of Forster prefixed to Handbook of the Forster and Dyce Collections at the Victoria and Albert Museum; Davies, A Literary Life; Renton, Forster and his Friendships; Temple Bar (1876) xlv1)

LAY COMMISSIONERS

Anthony Ashley Cooper, 7th Earl of Shaftesbury (1801-85) Educ. Harrow and Christ Church Oxford, BA 1823, MA 1832, Hon DCL 1841. Styled Lord Ashley 1811-1851. Conservative, M.P. Woodstock 1826-30, Dorchester 1830-31, Dorset 1831-46, Bath 1847-51. Commissioner of the Board of Control 1828-30. Lord of the Admiralty 1834-35. Ecclesiastical Commissioner 1841-47. Commissioner on the Board of Health 1848-54. Chairman of the Ragged School Union 1843-82. Lord Lieutenant Dorset 1856-85. Supporter of many parliamentary initiatives: including those connected with factories, lodging houses, chimney sweeps, and juvenile mendicants. Involved in many philanthropic and religious societies. (See Bibliography for biographies by Hodder, Hammonds, Best, Batiscombe, Finlayson; DNB; Boase; Wightman, MA Thesis, on Shaftesbury as a social reformer)

Edward Adolphus Seymour, 12th Duke of Somerset (1804-85) Educ. Eton and Christ Church Oxford. Styled Lord Seymour until his father's death in 1856. Whig, M.P. Okehampton 1830-31, Totnes 1834-55. Lord of the Treasury 1835-39. Secretary to the Board of Control 1839-41. First Commissioner of Woods and Forests (and ex-officio President of the Board of Health, where he clashed with Shaftesbury) 1849-52. Lord Lieutenant Devon. His wife, a noted beauty, presided over the Eglington Tournament. Author: Christian Theology and Modern Scepticism, 1872; Monarchy and Democracy, 1880. (Who's Who; Boase; Mallock and Ramsden, Letters, Remains and Memoirs; Times, 30 Nov 1885)

Robert Gordon (1786-1864) Born Kirkcudbrightshire. Educ. Christ Church Oxford, BA 1808. Conservative, M.P. Wareham 1812-18, Cricklade 1818-37, Windsor 1837-41. A committed Whig, known as the Dorsetshire Joseph Hume, for his parsimony. Commissioner of the Board of Control 1832-33, Secretary 1833-34 and 1835-39. Secretary to the Treasury 1839-41. Governor of St Luke's Hospital for the Insane, and St George's Hospital which provided three Medical Lunacy Commissioners. Also a Middlesex magistrate. (Boase; Who's Who; Gentlemen's Magazine, June 1864, p.814)

Robert Vernon Smith, Baron Lyveden (1800-73) Educ. Eton and Christ Church Oxford, BA 1822. Student at IT, but never called to the Bar. Whig, M.P. Tralee 1829-31, Northampton 1831-59. Junior Treasury Minister 1830-34, Joint Secretary to the Board of Control 1835-39, Under-Secretary of State for War and Colonies 1839-41. President of the Board of Control 1855-58. Deputy Lieutenant Northampton. Nephew of Sydney Smith, the Canon of St Pauls. Was an evangelical. (DNB; Who's Who)

Francis Barlow (1799-1887) (1st son of the Revd George Francis Barlow Rector of Burgh, Suffolk) Educ. Trinity Hall Cambridge, BA 1821, MA 1824. Barrister MT 1825, LI 1837. Also a Lord Chancellor's Master in Lunacy 1842-79. Appointed in 1845 to act as a link between the Lunacy Commission and the Lord Chancellor's Visitors in Lunacy. Honorary Lunacy Commissioner 1879-87. (Boase)

Henry Morgan Clifford (1806-84) Educ. Eton and Christ Church Oxford. Did not graduate. Whig/Liberal, M.P. Hereford 1847-65. Chairman of the Hereford Quarter Sessions and Colonel of the Monmouth Militia. Magistrate in Monmouthshire. Visiting Magistrate to the Monmouth, Hereford, Brecon and Radnor County Asylum. Member of Brooks, and the Oxford and Cambridge Club. Headed a deputation to the Lunacy Commission in 1848 from those counties. (Who's Who)

APPENDIX E

THE PRACTICE OF SIR ALEXANDER MORISON

Visiting Medical Officer	-	Bethlem	£180 p.a.
Visiting Medical Officer	-	Surrey County Asylum	£180 p.a.
Visiting Medical Officer	-	Southall Park	£125 p.a.
Visiting Medical Officer	-	Earls Court House	£110 p.a.

At Elm Grove Asylum he was paid between £50 and
£110 for 2 or 3 individual patients. c. £180 p.a.

Four pupils at Bethlem - 20 guineas each £84 p.a.

Surrey Madhouses Medical Visitor £63 p.a.

Dividends from lunatic stock £30 p.a.

Domestic visits from 2 to 10 guineas a time c. £100 p.a.

Dr Oxley paid individually for attendance on 6 or
7 patients at London House, Mare Street, Hackney c. £150 p.a.

Attendance at the Equitable Life Assurance Company
2 guineas a time c. £10 p.a.

This estimate is the minimum that Morison
would have earned, and the figure may well c. £1040 p.a.
have been higher.

MORISON'S PRIVATE NETWORK OF CARE

FOUNDER

HANWELL
SOUTHALL PARK ASYLUM

HANWELL
ELM GROVE ASYLUM

ALEXANDER
MORISON

SECOND GENERATION

SIR
WILLIAM
ELLIS

DR. WOOD
LADY ELLIS'
BROTHER

CLARA
NICOLL
HAD FOUR
SIBLINGS

MARGARET
MORISON
A PATIENT
AT ELM
GROVE

LADY ELLIS
(NEE WOOD)
HAD TWO
SIBLINGS

DR. CHARLES
NICOLL
VISITING
SURGEON

SARAH
MORISON
HAD THREE
SIBLINGS

DR. CHAPMAN

MISS WOOD
LADY ELLIS'
SISTER

JANE
NICOLL
RAN LODGINGS
FOR
IN SANE

DR THOMAS
COUTTS
MORISON
SURGEON ASYLUM
NORWICH ASYLUM
CRICHTON RYL
GLASGOW

EMMA
NICOLL
LOOKED AFTER
PATIENTS

JEANIE
MORISON
KEPT PRIVATE
LODGINGS

JOHN
SOMMERS
KEPT PRIVATE
LODGINGS

CHARLES
ROBERT
NICOLL
BROTHER OF
CLARA

THIRD GENERATION

SON
OF
ABOVE
MR ELLIS
(A CHANCERY
BARRISTER)

MISS
CHAPMAN
DAUGHTER OF
ABOVE

MR COOKE
(SURGEON)

FOURTH

MISS COOKE
WORKED AT
SOUTHALL PK
MATRON
NORWICH

NOTES

†1 VISITING SURGEON TO
ELM GROVE & LAWN
HOUSE HANWELL

†2 LADY ELLIS ASKED
ALEXANDER MORISON
TO HELP DR CHAPMAN
& HIS DAUGHTER TO SET
UP AN ASYLUM -
ALSO TO GIVE CHAPMAN
A TESTIMONIAL FOR A
JOB AT DEVON ASYLUM

APPENDIX G

CASE STUDY OF OPPOSITION TO THE COMMISSION

DR SEATON: A PORTRAIT IN CONTUMELY

I have chosen Joseph Seaton 1 of Halliford House, Sunbury, Middlesex for a brief portrait; not because he is the best example of opposition by a Metropolitan proprietor to the Lunacy Commission, an equally good case could be made out for F B Winslow (Brandenburgh House and Sussex House), Mr G Byas (Grove Hall Bow) or Mr P Armstrong (Peckham House); but because he is typical of a class of men who were presented in too favourable a light by Parry Jones. The latter described a wide range of asylum owners and practices, but ended by concluding that not all licensed house owners were by any means as rapacious as they have been depicted. The Lunacy Commission's records however cast serious doubts on this apologia, indicating that even the most respectable of practitioners regularly infringed the law.

Seaton appears to have been in trouble from the moment of his first contact with the Lunacy Commission. In 1845 he had qualified as an MD at St Andrews and immediately became a FRCP Edinburgh. 2 Prior to that his only qualification was that of an apothecary (LSA 1836) and as such he had been the Resident Medical Officer at the North Dispensary, New Road, and the Royal General Dispensary, St Pancras in London. After leaving Edinburgh he lived briefly in Stoke on Trent and at that time approached the Commission to inquire about the status of a single patient he had acquired, who had been placed under certificates with him to avoid a legal action. The same month, he was required to explain why he had the care of two patients.

without a licence, and claimed that one was only very temporary, although this was of course illegal. 3 At this point there was some excuse for his behaviour, as he had no previous experience, and had originally approached the Board for advice. The following year Seaton moved to London and set up Halliford House, Sunbury, Middlesex a private asylum 19 miles from London. Set in 18 acres of ground, this catered for 3 male and 3 female patients initially. (By 1860 it had acquired 10 male and 12 female) Seaton rapidly became a regular member of the asylum proprietors community, and boosted his reputation in the accepted fashion by writing two monographs, one of which, ironically, was titled, The Present State and Prospects of Psychological Medicine, with Suggestions for Improving the Laws relating to the Care and Treatment of Lunatics. He also joined the Medical Society of London, British Medical Association and the Asylum Officers Association.

Seaton first clashed seriously with the Commission in February 1847, when, after applying for an extension to his licence of 3 males and 6 females, he was recalled by Shaftesbury, and questioned about a will made in his favour by Mr Parry, a patient at Halliford. The circumstances of this will were undoubtedly suspicious, as it was drawn up by Seaton's solicitor when Parry was clearly ill, and left the good doctor sole beneficiary of a large house worth £700, to the annoyance of several relations. Seaton challenged the Commission's right to make his licence conditional on his providing information about the contested will, but when he refused to do so, his licence was removed. The Commission clearly rescinded this decision, because in July 1848, when final judgment in court found the will invalid, it again reported a decision not to renew his licence. Despite this, on August 15th 1848 in Shaftesbury's absence,

a Board consisting of Procter, Prichard, Mylne, Campbell and Gordon having heard evidence from the patient's sister and solicitor decided to renew the licence provisionally for four months. Gordon informed Seaton that he was not to, 'go away with the idea that the Commissioners had in any way been induced to change their views of his conduct with reference to the will, by the fresh evidence,' and a final decision was held over for Shaftesbury's next attendance. Six weeks later Seaton even had the temerity to ask for a change in his licence conditions. In November 1848, with Shaftesbury again in the Chair, the licence was renewed for a six month trial period only, because by now it had emerged that the will had been witnessed by Seaton's attendants - and Parry's Chancery Committee had not been informed of the proceedings.

The following year Seaton was again in trouble for allowing patients to go on home visits lasting two months, without obtaining permission, during which time they were without certificates. They had been readmitted to the asylum and their certificates signed after they had been admitted, in contravention of the law. Seaton denied that they had been boarders without certificates, before the current certificates were obtained, by arguing that he had returned the money received for their keep. Once more the Commissioners satisfied themselves with a warning that further irregularities would lead to the loss of his licence. 4

Seaton's transgressions took a variety of forms, and were all characterised by a contempt for the law. He advertised his asylum in a variety of journals, lauding the principles of moral treatment and non restraint, yet made reprehensible use of seclusion. In 1855 he hit on a fairly novel way of attracting publicity and enhancing his reputation, by resorting to the law courts. Seaton decided to

prosecute the late female attendant in charge at Halliford for stealing a pass key and helping a patient escape. At the same time he also took his apothecary to court for passing patients' clandestine correspondence. Neither of these would necessarily have inspired public confidence in themselves, but Seaton had instructed his counsel to state in the application for costs that the prosecution was instigated, 'with the knowledge and authority of the Commissioners in Lunacy.' This was completely untrue, but the Commission again took no firmer action than to publish a denial of this in the Times and four other morning papers. 5

On many occasions, Seaton's conduct amounted to outright refusal to co-operate, an insolent rudeness. In January 1856, the Board received a letter from him in answer to its query about the high turnover of staff in his establishment, to which it subsequently replied that it declined to receive such a letter. Two months later he was again quizzed because he was keeping boarders illegally after their discharge from Halliford. In 1857 and throughout 1858 Seaton carried on a running battle with the Board over his constant use of an unsuitable strong room for secluding patients. Initially he cited the support of two friends for this, and then failed on three occasions to appear before the Board when requested to do so. Finally in April 1858 he was issued with a summons and the inquiry over his seclusion room extended to other aspects of his asylum. Seaton was about to appoint a Resident Medical Officer, the usual practice in these asylums, as it gave the proprietor a free hand to come and go. Mr Underhay had been selected, according to Seaton, with a view to his ultimately being admitted as a partner. The Board, following the practice it had adopted since the mid-1850s, asked for details of these.

arrangements. Seaton refused to answer except on oath. Yet again the Commissioners drew back from forcing the issue, feeling that the subjects under inquiry were not, 'of such deep solemnity as to justify them in appealing to the sanctity of an oath.' Shaftesbury however, delivered Seaton a long lecture stating that the Board reserved the right to decide whether to grant Underhay a licence either alone or as a partner, whether to exclude the strong room in which the patients had so often been placed from the licence, and whether to renew the licence at all in view of his repeated resistance to their requests and recommendations. At the end of this homily Seaton stalked straight out without a word in reply. The Board, perhaps not wishing to appear too intrusive in private enterprise, did nothing further.

Seven months later, in November 1858, when the licence again came before the Board, Seaton reported that Underhay had neither become the Resident Superintendent, nor a partner. He was then asked if the latter had, 'by reason of a connexion with the property of any kind, the power of disturbing you in the possession of Halliford House, and consequently....of disturbing the patients resident therein?' Seaton again refused to answer, and was therefore shown the act 8 & 9 Vict c.100, s.24, which required a true description of the proprietor's interest in an asylum. He ultimately replied in the negative, stating that he was the sole proprietor and Underhay could not disturb him. His evasive replies were clearly unsatisfactory, and Shaftesbury therefore asked him if Underhay had any interest by virtue of any lieu in the way of mortgage and assignment or otherwise, at which Seaton finally declined to answer. As a result his licence was only renewed for four months and he was banned from using the strong room for patients.

In February 1859, Seaton again refused to divulge Underhay's interest, and after first threatening outright cancellation the Commission decided again to limit the licence renewal four months. Seaton then challenged their right to deal with him in this way. Evidently the Board was concerned that it might be extending its powers in an unwarrantable way, because it consulted its lawyer. However the following month Seaton caved in and admitted that he had an outstanding loan from Underhay and that the latter had a hold over the furniture and effects in Halliford. This loan was repayable by November 1859, and the licence was therefore only renewed until that time, when in fact Seaton paid the £1,000 owing and had his licence restored. 6

At times Seaton's behaviour was matched by more than a hint of dishonesty on the part of the Commission. For example on the 20th September 1860, Seaton applied to take a patient to Edinburgh and Glasgow for a few days. The following day the Board replied that it was in its power to approve such a removal, but it did not actually forward the necessary permission. Seaton had clearly left this request to the last minute, possibly fearing some technical objection. On the 25th, the day he left for Scotland, he informed the Board that its letter had reached him after all the arrangements had been made. He added, disingenuously, that any alteration in the plans would have excited the patient and suggested that he should treat it as a case of escape. Accordingly he sent them a notice of escape on the 25th, thus laying his client open to the much greater disruption of a forcible return. He followed this with a notification of their return on the 4th of October ten days later. Clearly such an unprincipled abuse of the law merited censure. However the Commission chose only to demand a fresh order and

certificates of admission stating that the patient was now illegally detained. As he had not escaped, the 14 day rule about recapture of patients did not apply. Instead the patient had in effect been discharged, as Seaton had no permission from the Commission to grant leave. (c.100, s.LXXXVI) Yet again it meant a severe admonition for Seaton, from Shaftesbury. 7

The 'career' of Seaton and many other madhouse owners like him, must bring into question the position adopted by the Commission itself. It is hard to understand how a body of men chosen for their probity and experience could repeatedly act with weakness when faced with proprietors continually infringing the very laws that the Commissioners had helped frame. There is an explanation for their attitude. It lies somewhere deep in the matrix of laissez-faire versus State intervention; the possibilities for legal action versus the pragmatics of cost effectiveness. Proprietors played out a complicated minuet with the Commission, of thrust and counter thrust, threat and apology: a dance, the delicate nuances of which, could easily be lost on new licensees. Seaton is typical of many proprietors who gained confidence in the face of official helplessness and then began to ignore the law with impunity.

Many have accused the Commission of petty bureaucracy and of exaggerating the faults in private asylums. Such criticism ignores the painful fact that a system of control and regulation is essential when men like Seaton are placed in positions of responsibility. In reading this account it is perhaps possible to feel sorry for Seaton. He had, if nothing else, made the most of his limited beginnings in life. We can maybe understand, if not forgive him. However, for a man in absolute control of his fellow human beings, the really reprehensible aspect of Seaton was the

essential dishonesty he evinced in all his dealings. There may be no direct evidence that he abused or neglected his patients, apart from constantly secluding the most difficult, but a man prepared to be so duplicitous hardly seems the right person to whom to entrust the helpless. Without proper controls such men inevitably will abridge the comfort of patients, to ease their own financial difficulties, or to create for themselves a much higher standard of living.

The Board's infliction of petty pains, pinpricks and penalties was the ineffectual concomitant of the Treasury's policy of retrenchment. Without the funds effectively to prosecute one or two owners like Seaton, the Commission was left with a policy of gradually improving minimum standards and raising consciousness of these. It was not a policy for effecting rapid change nor for bringing rogue proprietors to heel.

Footnotes:

- 1) Joseph Seaton, MD St Andrews 1845; FRCP Edin. Resident MD North Dispensary and Royal General Dispensary St Pancras. Fellow Med Soc London. Mem Brit Med Assoc.
- 2) It is possible that Seaton merely bought this qualification, which was a common practice at this time.
- 3) MH50/41, 9 Oct 1845, 15 Oct 1845.
- 4) MH50/2, 3 and 11 Feb 1847, 27 Jul 1847; MH50/3, 15 Aug, 3 Oct 23 Nov 1848; MH50/4, 9 and 26 Aug 1849.
- 5) MH50/7, 4 and 21 Apr 1855.
- 6) MH50/8, 4 Jan and 13 Mar 1856; MH50/9, 2 Dec 1857, 30 Mar and 21 Apr 1858; MH50/10, 3 Nov 1858, 2 Feb, 29 Jun and 2 Nov 1859.
- 7) MH50/11, 24 Sep and 7 Nov 1860.

APPENDIX H

LIST OF HOME SECRETARIES AND LORD CHANCELLORS

1844-1860

HOME SECRETARIES

LORD CHANCELLORS

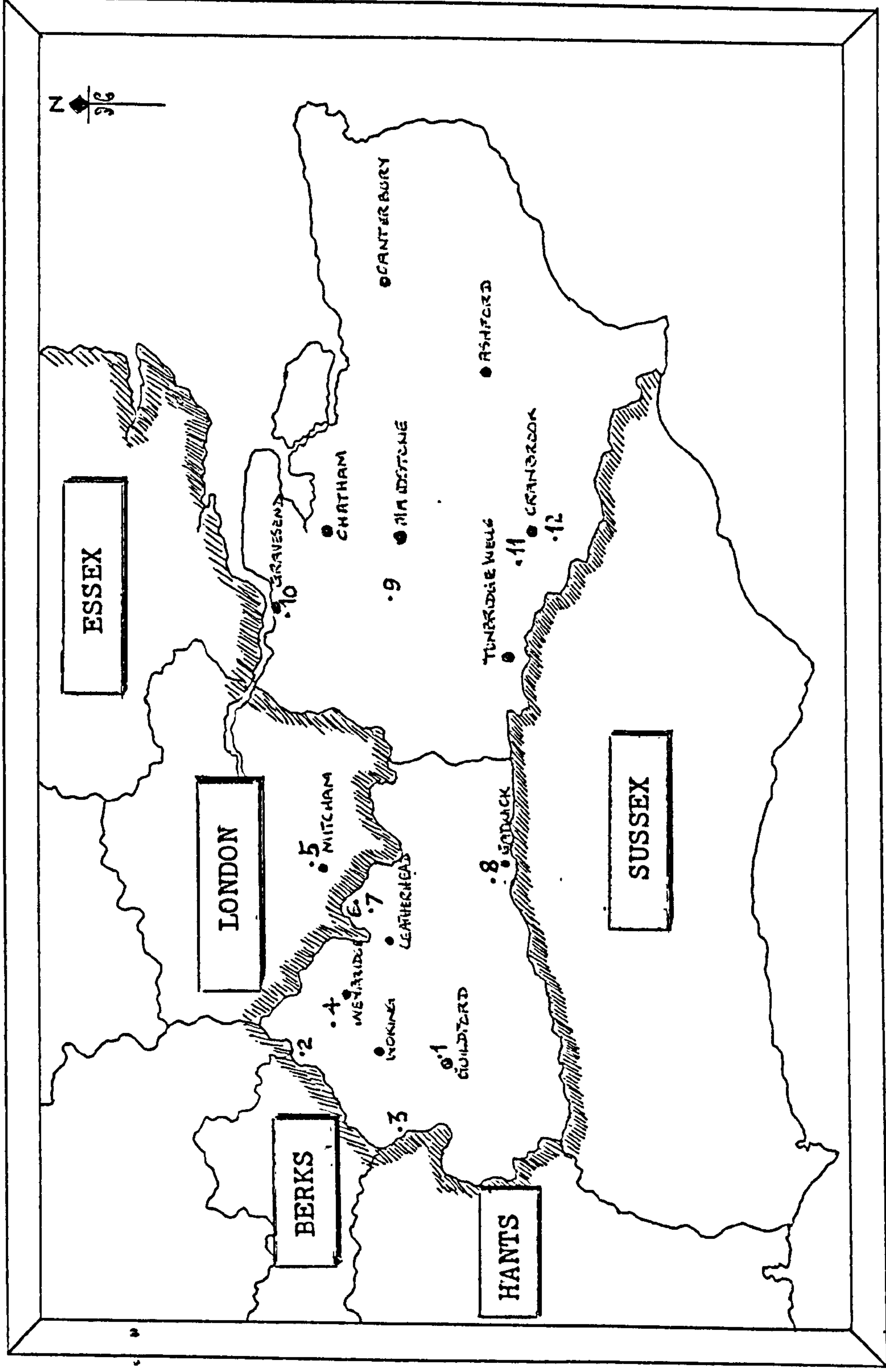
1844-46	Sir J Graham	John Copley Singleton, Lord Lyndhurst
1846-50	Sir G Grey	Sir Charles Pepys, Lord Cottenham
1850-52	Sir G Grey	Thomas Wilde, Lord Truro
1852	S H Walpole	Edward Burtenshaw Sugden, Lord St Leonards
1852-55	Viscount Palmerston	Robert Monsey Rolfe, Lord Cranworth
1855-58	Sir G Grey	Robert Monsey Rolfe, Lord Cranworth
1858-59	S H Walpole	Frederick Thesiger, Lord Chelmsford
1859	T S Sotheron Estcourt	Frederick Thesiger, Lord Chelmsford
1859-61	Sir G C Lewis	John, Lord Campbell

SURREY

1. LEA POLE STOKES
NEXT GUILDFORD
SURREY
2. GREAT FOWERS
EGHAM
SURREY
3. FRIMLEY HOUSE
FRIMLEY
SURREY
4. WESON HOUSE
CHERISLEY
SURREY
5. THE RETREAT
MIDHAM
SURREY/LONDON.
6. EWELL HOUSE,
EWELL
SURREY
7. CHURCH STREET HOUSE
EPSON
SURREY
8. TIMBERHAM HOUSE
CHARLWOOD
SURREY

KENT

9. WEST MALLING
KENT
10. WINDMILL TERRACE
MILTON NEX GRAVESEND
KENT
11. TABLEBURY HOUSE
GOJDHURST
KENT
12. NORTH GROVE HOUSE
HAWKHURST
KENT.



PRIVATE ASYLUMS IN KENT AND SURREY

APPENDIX J

A BRIEF ACCOUNT OF EACH ASYLUM IN KENT AND SURREY

1. Surrey County Asylum, Springfield, Tooting.
2. Kent County Asylum, Barming Heath, Maidstone.
3. Bethlem Hospital.
4. Guy's Hospital Lunatic Ward.
5. Licensed Houses in
Metropolitan Surrey:
 - Stockwell House, Lower Tooting
 - Surrey House, Battersea
 - Sleaford House, Battersea
 - Clapham Retreat
 - Althorpe House, Battersea
 - Peckham House
 - Audley House, Kender Road, Old Kent Road
 - Friern Place, Peckham Rye
 - York House, Battersea
 - Camberwell House
 - Doddington Retreat, Kennington
 - Effra Hall, Brixton
 - Vine Cottage, Norwood Green
6. Licensed Houses in
Provincial Surrey:
 - Lea Pale House, Stoke-next-Guildford
 - Great Fosters House, Egham
 - Frimley Lodge, Frimley
 - Weston House, Chertsey
 - The Retreat, Mitcham
 - Ewell House, Ewell
 - Church House, Epsom
 - Timberham House, Charlwood
7. Licensed Houses in
Metropolitan Kent:
 - Holt's House, Blackheath
 - Dartmouth House, Lewisham
8. Licensed Houses in
Provincial Kent:
 - West Malling
 - Windmill Terrace, Milton-next-Gravesend
 - Tattlebury House, Goudhurst
 - North Grove House, Hawkhurst

SURREY COUNTY ASYLUM, SPRINGFIELD, AT TOOTING BEC

The first Surrey County Asylum opened in 1841, in response to the growing expense of farming out the county's chronic insane to private licensed houses in the metropolis. Sir Alexander Morison who was appointed as Visiting Physician before building commenced, carried out a survey of these patients, and on the 14th of June 1841 when the asylum opened, 299 were immediately drafted in. During the first year this figure became 385 (and included 172 from Peckham House, 51 from Hoxton and 54 from Bethnal Green).

The site at Springfield Park, Wandsworth was bought from Henry Perkins, a wealthy brewer and partner in the firm of Barclay and Perkins, who had himself obtained the freehold from the 2nd Earl of Spencer who owned a lot of property in the area. Building started in 1838, and was done to the design of William Moseley, who was the County Surveyor for Middlesex and had previously been working on extensions at Hanwell. Moseley had also worked on the Middlesex House of Correction at Coldbath Fields. The exterior was done in an interesting tudor style, but the interior was dull and cheerless. The original cost of the asylum including land was about £90,000, and it initially catered for 294 patients. Much of this accommodation was in single rooms. Subsequent lack of space meant that some of these were converted into dormitories, allowing for 90 more inmates. In 1849 two northern wings were added with space for 500 more, at a cost of £47,000, and in 1853 single rooms and dormitories for 70 more were added for £5,000. Thus by 1860 the asylum held up to 954 inmates, and was to expand even further, overcrowding the 97 acre site, despite the objections of the Lunacy Commissioners.

KENT COUNTY ASYLUM, BARMING HEATH, MAIDSTONE

On the 7th of July, 1825, a return made by order of the county magistrates showed that there were 160 pauper lunatics and 50 dangerous idiots in Kent. In 1828, a committee was appointed by the Quarter Sessions to superintend the building of an asylum, after difficulty had arisen over the placement of a criminal lunatic from St. Augustine's prison. Thirty seven acres were purchased (24 were added in 1847) from the parish of Maidstone, situated at 200-300 feet above the Medway on Barming Heath. The site overlooked a valley covered in hop plantations and was faced by timbered and park-like hills. The asylum was built for 150 patients and opened on January 1st, 1833. The first building consisted of a central house of four stories, with two wings, or tiers of wards of three floors, on each side. This front faced south, and at each end there was a wing extending backwards at a right angle. There was an artificial warming and ventilation system heated by a steam engine. The latter also raised the asylum's water from a well. In 1835 two hospitals (six patients each) were added, and two years later these were both enlarged by seven beds. From 1840-42 space for 100 more was added. In 1846 the MO converted the hospitals into noisy wards as they were insufficiently used. Four years later the justices built a second asylum on the same site which was originally intended for chronic patients, under the new Lunacy Acts. In the event, it was used for the quiet and non offensive chronic patients, but also for the curable and convalescent. The asylum now had room for 650, and this number was not exceeded during the period of this study. Between 1867 and 1872, a third asylum was erected in close proximity to the

other two and finally in 1907 two more wings for a hundred patients each were added, making the resident population over 1000 patients.

Initial outlay on the asylum was almost £78,000, which was considerably more than the amount spent on the county gaol and prison service. (In 1852 comparative expenditure was £123,896 on the asylum and £19,313 on gaols, houses of correction and the prison). However complaints about the expense of the asylum seem to have been fairly muted compared with Surrey. Between 1833 and 1860 there were 3,239 admissions to Kent. Of these patients, 34.0% died, 32.8% were cured, 13.9% were discharged uncured and 19.1% remained. Thus only 46.8% could expect to see the outside of an asylum once admitted. (In Surrey the same figure for this period was 44.8%) During this same time, the average number cured, calculated on the average resident population at any given time, ranged between 10.4% and 12.4%. The evidence (further details of which are in the text) also suggests that the overall level of nursing care gradually deteriorated as the number of inmates rose.

The first MO was George Poynder MRCS LSA, who had been the original Superintendent at Gloucester County Asylum and had been trained under a system which used mechanical restraint of patients. He retired in 1846 and was replaced by James Edmund Huxley MD MRCS LSA. Huxley was the elder brother of T H, and had trained with him at Charing Cross Hospital. He too had been a medical officer at Gloucester County Asylum and was appointed at the young age of 25, ahead of Hugh Welch Diamond, who later went to Surrey County Asylum. Huxley remained until 1863 and consolidated the implementation of non-restraint. He was to be a vociferous opponent of the Lunacy Commission's officialism.

BETHLEHEM HOSPITAL

Bedlam, a corruption of Bethlehem, applied to the Hospital of St Mary of Bethlehem in Bishopsgate, London which was founded in 1247. The priory was established to entertain members of the order when they came to England from Palestine. In 1330 it was mentioned as a hospital, and in 1402 as a hospital for lunatics. Sixteen years later it came under the protection of the City of London, and after the dissolution of the monasteries was granted to the mayor and citizens. In 1547 it was incorporated as a royal foundation for the reception for lunatics, and ten years later was placed under joint management with Bridewell. In 1675 a new hospital was built in Moorfields, on the design of the Tuileries which incensed Louis XIV, who ordered various buildings for menial purposes to be built on the design of St James. This institution was in turn replaced by one in Lambeth Road, Southwark, in 1815, now the site of the Imperial War Museum. (This building cost £122,572, of which £72,819 came from government grants, £23,766 from hospital funds, and £3,000 from the Corporation of London.) The fourth and present site was established in 1917 at Beckenham, in Kent. In the middle ages discharged patients, or beggars posing as such, wandered the country asking for alms to pay back their fees. They were known as Toms o' Bedlam, Besses o' Bedlam and Abraham-men. These patients wore a gold star on their sleeve, were the subject of many ballads and appeared in several Shakespearian plays. The name Abraham, or Abram-men came from an Abraham ward in the hospital, and these patients were noted for shamming illness.

There is no good history of the hospital. The one generally cited, that written by E G O'Donaghue in 1914, is an inaccurate and

self laudatory account, which presumes a whiggish progress of amelioration throughout the hospital's history. As the hospital's present archivist, Patricia Alldredge, has pointed out, historians and other commentators have relied heavily on popular literature and myth in their accounts of the institution, without attempting a thorough search of source materials. The hospital has currently commissioned Lord A Briggs to write a more comprehensive history.

The early nineteenth century saw a number of changes at the hospital. In 1816 after the new hospital was built, the governors contracted with the Home Office to take criminal patients. During the period under study, there was a steady rise in the number of male criminal lunatics at the hospital. Between 1845 and 1860 the overall number of criminal patients went up from 87 to 128. The males increased from 66 to 113, but the females went down from 21 to 15. During the same period the overall number of lunatics in the hospital was fairly constant, remaining between 385 and 395. All of these were private patients. The hospital operated stringent admission criteria, banning the admission of epileptic, paralysed, and idiotic patients. In 1818 there was a strong move by several evangelical governors to establish a resident chaplain, which happened the following year. For a contemporary account of the hospital see, Martin, An Account of Bethlem Hospital: abridged from the Report of the late Charity Commissioners. In the Surrey area Bethlem acted very much as a first resort institution for the county's insane, many of those who subsequently became chronically ill, were passed on to the Surrey County Asylum.

GUYS HOSPITAL LUNATIC WARD

The lunatic ward at Guys (1724) was founded by the Will of Thomas Guy. He stipulated that 20 patients discharged from Bethlem, St Thomas' and other hospitals as incurable, should be provided for, but that if there were vacancies ordinary hospital patients could be placed in the beds. In 1728 the lunatic building was opened with a man and woman in charge. Patients were admitted every Tuesday fortnight and each had a Bond of Security (£100) made by two persons. £10 had to be paid towards their clothing. A Governors' Minute 1755 states that caution should be taken that all patients admitted were in fact lunatics, as they were only examined on entry and every four months thereafter. This was rectified in 1783 when MOs were asked to report the condition of the ward and patients every taking-in day. There is some evidence that they did occasionally inspect the ward, because in 1785, they complained that the nurses needed to keep the ward free of vermin. In 1795 the Governors agreed to £4,388 being spent on a new building, and decided that in future only females be admitted. This new ward opened in 1797, and consisted of two galleries and a large day or dining room. Each gallery had ten cells, five either side and these were 10 foot by 8 foot. The unit was modelled on a Mr Tucker's asylum. Admissions were by right of nomination to the governors in rotation, but they do not appear to have visited at all. In 1824, a William Hunt left further money in his will which had to be used within three years, as it would otherwise go to three other institutions, St Thomas's, the Philanthropic Society and a Refuge for the Destitute in Hackney Road and Hoxton. The numbers were therefore increased to 24 by adding an extra cell to either side of both galleries. They remained at that level until 1845.

PRIVATE LICENSED HOUSES IN SURREY

METROPOLITAN ASYLUMS:

STOCKWELL HOUSE, LOWER TOOTING (1797-1835)

Opened by William Moyses in 1797 this asylum only received private patients, and was licensed for up to 20. In practice it took two or three patients. The house was always reported in excellent order by the Metropolitan Lunacy Commissioners. This institution remained open until 1835.

SURREY HOUSE, BATTERSEA (1819-1832)

This asylum was run by Walter Dobles until 1832, when he sold up to go into partnership with Ann Symmons at Cowper House in Old Brompton. The house contained eight or nine private patients towards the end of its existence, but was discouraged from taking females by the Metropolitan Lunacy Commissioners because there were insufficient means of ensuring separation between the sexes. This asylum was largely for incurable patients.

SLEAFORD HOUSE, BATTERSEA FIELDS (1822-1835)

Owned and run by Thomas Cann, a local surgeon. Cann actively appeared to promote cures. The house took 12-14 private patients of both sexes, although licensed for 20. Cann showed great alacrity in carrying out the Metropolitan Lunacy Commissioners' suggestions, improving the linen, raising the boundary walls and providing extra nursing staff.

CLAPHAM RETREAT (1823-1872)

Founded in 1823 by George Man Burrows who had previously owned an asylum in the King's Road, Chelsea (1817-1823). Clapham Retreat took from 20-23 male and female private patients in the 1830's, but by 1860 this had been reduced to nearer 14 or 16. Burrows became well known due to his promotion of the Apothecaries' Bill in 1815, and his monographs on insanity in 1820 and 1828. His practise as an asylum owner suffered a heavy blow in 1830 however, as a result of the Edward Davies case in Chancery, in which his integrity in confining Davies appeared suspect. Burrows was the first in England to report the work of Bayle and Calmeil, in which clinical signs were correlated with postmortem findings to delineate the disease General Paralysis of the Insane, and his resultant reputation helped mitigate the damage caused by the Davies case and secure further patients. Clapham took the majority of Chancery patients from the south-east of England admitted to asylum care in the 1840s and 1850s, who were not placed in Ticehurst Asylum. Burrows himself was a friend of most of the main private asylum owners in London, and was active in promoting the interests of this group. In 1844 a surgeon, John Bush, took over from Burrows. Bush was related to the Batt family who owned Witney asylum in Oxfordshire. Under him the asylum increasingly began to attract adverse comment from the Lunacy Commission, especially for its excessive use of restraint. Bush kept the Retreat open until 1872.

ALTHORPE HOUSE, BATTERSEA (1823-1851)

This building was first used as an asylum in 1823, by Paul Haines, a lay proprietor. In September 1829 there were 14 patients in residence and over the next five months admissions took place at

about one a week, and by the following year there were 26 patients. (The house was actually licensed for up to 30 male and female private patients at this time). As with Surrey House, the Metropolitan Commissioners considered that the premises were ill adapted, especially the airing grounds. They also referred to smelly rooms and lack of proper bedding, but management of the asylum remained largely undisturbed before 1845. In 1835, James Tow and his wife, the ex-steward and matron of St. Lukes Hospital, took over the asylum and continued to manage it until its closure in 1852. Two years after taking over the asylum Tow started to take pauper patients, and the number of inmates gradually increased, rising to 46 in 1848 after the completion of some extensions. In 1849 the asylum was hit by cholera which was blamed on overcrowding and inadequate drainage. Tow's numbers were reduced to 2, and although he was eventually given permission to take a few more female patients, he decided to surrender his license a couple of years later.

PECKHAM HOUSE. (1825-1951)

Peckham House was established in 1825 by three men, Charles Mott, Peter Armstrong and George Parsons MRCS. The asylum was housed in a large mansion which had originally been owned by the wealthy Spitta family. Within 5 years of opening this asylum contained 250 patients of both sexes, 49 of whom were private. By 1846, numbers were up to over 400 after some rebuilding. The Lunacy Commissioners watched with mounting concern as this figure went up to almost 500 by 1850, and they gradually forced the owners to reduce the numbers of paupers so that by 1860 the total number of inmates was nearer to 300. The asylum continued in existence until

1951, mostly catering for private patients, and it was finally sold and knocked down to make way for Peckham Girls' School.

Charles Mott was probably the moving force behind the scheme. He was later to become an assistant Poor Law inspector in the south of England and then a district auditor under the New Poor Law in Lancashire. In the latter position he abused his trust by becoming financially involved in Haydock Lodge Asylum and using his position to direct custom its way. It is likely that he fulfilled a similar role at Peckham House which was specifically designed to attract the same class of patients. On February 2nd 1827 a handbill was issued to all parishes south of the Thames soliciting their support. Remarking that Parliamentary returns showed a steady increase in insanity, it stated, "the want of a suitable establishment for the reception of insane poor on the south side of London has long been experienced, and much trouble has been occasioned to the different parishes, by being compelled to send their insane to a distance over the water for security." The proprietors stressed their experience in the management of large public establishments and promised that attendants could be sent to any distance. This advertisement failed to attract some parishes though. Lewisham and Bermondsey were among those who continued to use asylums like Sir John Miles' house at Hoxton.

The Metropolitan Lunacy Commissioners effected considerable changes in the fabric and management of Peckham between 1828 and 1845: these included better classification of patients, more employment and amusements, new kitchens and infirmaries, a resident surgeon, increased access for relatives, new workshops, several additions to the nursing establishment, a chapel and new washhouse/laundry. Despite these improvements the asylum under the

visiting physician David Uwins continued to make regular use of restraint and it took the Lunacy Commission a long time to alter this practise. Local Guardians in the 1830s however reported favourably on Peckham in comparison to some other private asylums.

Peter Armstrong another of the founders, appears to have bought out his partners, and his family continued to run the asylum until 1872. His son Henry who qualified as a surgeon had become joint licensee in 1857 and taken over in 1859. The Armstrongs undoubtedly made a lot of money out of the asylum, buying up land and property extensively in the area. In 1872 Dr Rupert Stocker bought the institution and his grandson Rupert presided over its demise in 1951, which was caused by the imposition of particularly heavy death duties.

Throughout the period 1845-1860 Peckham House was the object of criticism by the Lunacy Commissioners because of cruelty to patients, unacceptably high levels of staff turnover, inadequate diet and poor furnishings and yet it continued to flourish because it filled a gap in provision for the pauper insane.

AUDLEY HOUSE, KENDER ROAD, OLD KENT ROAD (1829-1831)

Opened by John Kirkman in 1829, this was given up in 1831 when he became superintendent of the new Suffolk County Asylum at Melton. Kirkman had only six patients, and was criticised for insufficient separation of the sexes. The Metropolitan Lunacy Commissioners also commented that the house was "neither as neat or as sweet as it ought to be, but the patients do not appear uncomfortable."

ERIERN PLACE, PECKHAM RYE (1832-1835)

Opened in 1832 by William Pollard the Medical Superintendent from Clapham Retreat. He took five female patients. The venture only lasted three years.

YORK HOUSE, BATTERSEA (1844-1857)

This was opened in late 1844, by J G Millingen and a Mr. Parkin, surgeon. It catered for 17 female patients, and the numbers only ever rose to about 23. York House was a fifteenth century mansion originally the official residence of the Archbishop of York in London. Henry the Eighth is supposed to have met Anne Boleyn there. In Henry's reign it was used for papist prisoners. From 1674-1686 it was owned by an East Indiaman, but by mid-eighteenth century it had become an enamel factory. Finally it was a malt factory before becoming an asylum.

Millingen was a peninsular surgeon, with powerful friends in the army. After retirement on half-pay, he had spent some months studying at Bethlem and St. Lukes, before becoming the Medical Officer at the Chatham Military Asylum. In 1838 Millingen was appointed superintendent of Hanwell Asylum which proved to be a disaster. The Visiting Magistrates dismissed him because they claimed that his military style of management had caused staff unrest. In fact his removal was almost certainly more to do with the battle going on in the magistrate's group between two rival factions.

In 1850 Millingen was bought out by two spinsters, the Misses Lush. These ladies were cousins of the Finch family who owned two asylums in Wiltshire. The family had also owned an asylum at Mitcham, Surrey (see The Recovery, Mitcham) from 1819-1825 and

Kensington House, London in the 1830s and 40s, where these ladies had worked. W C Finch the owner of Kensington House loaned them £1500 to purchase a 30 year lease, and in 1855 the Lunacy Commission reported that he received the larger proportion of the profits towards repayment of the capital he had invested. In September 1855, he was actually appointed Resident Medical Officer, and continued as such until the asylum closed in 1857.

CAMBERWELL HOUSE (1846-1955)

Founded in 1846 by Dr. John Hayball Paul, a surgeon who originated from the Isle of Wight, and remained connected with the asylum until his death in 1899. Paul, who later became a wealthy man in his own right, and was for many years the Treasurer of the Association of Medical Officers of Asylums and Hospitals for the Insane (1864-95), went into partnership with two other men; Frederick George Aubin surgeon, the owner of a child farm at Norwood which was eventually sold for £10,000, and a Mr. Alfred Richards of Middle Temple. The building they purchased was an old school which had been owned and run by Dr Nicholas Wanothrocht and his descendants since the late 18th century. More recently the Royal Naval School had been leasing the premises. Almost immediately there were complaints and a petition from the local inhabitants, who objected to the site being used to establish an asylum. Amongst the reasons given were that it would depreciate the value of property in the area and was overlooked by two private houses, and the local workhouse. A delegation of local people headed by the Surrey MP Mr Kemble attended the Commission's offices, but the latter had, in Lord Shaftesbury's absence already given Aubin the go-ahead to start converting the premises, which he had done with great alacrity. The

Commissioners therefore felt they could not put a stop to the erection of a fifth large private pauper asylum in the Metropolis (to add to Bow House, Red House and White Houses at Bethnal Green, Sir John Miles' at Hoxton and Peckham) because such a large outlay of money had already been made.

Camberwell originally opened with a 21 year lease, an annual rent of 300 guineas and a site of nearly 3 acres. Initially there were about 167 patients of both sexes in residence, most of whom were paupers. By 1860 the land had increased to 6½ acres and the number of patients to 325. The Commissioners however had gradually engineered a change in the composition of the patient population. In 1847 only 6 out of 246 (2.4%) patients were private. By 1860 this had become 75 out of 325 (23.0%). At the turn of the century, there were 20 acres of grounds, the asylum having spread to the south side of the Peckham Road, and the numbers were eventually to rise to 420 in the asylum's heyday, most of whom were private. In 1909 it was possible to keep a patient for £65 a year, but by 1955 costs had risen so much that the owners struggled to manage their financial situation at rates of £10 per week. The whole estate was finally sold to Southwark Council for £225,000 in 1955.

Like Peckham House, this institution continually attracted adverse comment in the period 1845-1860, because of its poor material standards, inadequate staffing levels, abuse of patients and meagre diet. Paul was also prevented from accepting the admission of patients from the provinces where counties had their own, but more expensive, accommodation available. Under the Commissioners the staffing ratios at Camberwell were steadily improved as they were in all the private asylums.

DODDINGTON RETREAT, SOUTH PLACE, KENNINGTON COMMON (1847)

This institution provides a good example of the potential fragility of the Commissioners' investigative technique, but also of the strength of their contacts with asylum owners in the Metropolis. In February 1847, a layman, Charles Dean, applied for a licence for eight private male patients. He provided proof that he possessed an annuity of £300 p.a. to run the asylum, and after an inspection of the premises by Procter and Turner, a licence was agreed, provided his testimonials and the medical attendant he obtained were satisfactory. Despite the fact that Bush's testimonial from Clapham Retreat could offer no information because of the shortness of Dean's period of employment there, the latter was approved. The fact that Dean was an ex-attendant, and that provision of an asylum for six patients could hardly be justified on the grounds of filling a gap in provision for the insane, did not appear to disturb the Commissioners at this time. It was only six months later that the true situation was revealed. C A Elliott, the owner of Cowper House, informed W G Campbell on one of his official inspections that Dean had been sacked from Cowper House in 1845 for stealing patients' shirts. Dean had come to Cowper with a good reference from Clapham despite refusing to do domestic chores there. Dean told the Board he had not thought it necessary to mention his employment at Cowper when applying for a licence, because of his difference of opinion with Elliot. It appeared on investigation however that Dean had admitted his thieving and his licence was not renewed in 1848.

EFFRA HALL, BRIXTON (1848-1879)

This asylum was one of two created when Cowper House, Old Brompton (see reference above concerning Walter Dobles' connection with this after he closed Surrey House) was broken up. The male patients all went to Munster House, Fulham and the females to Effra. The asylum was owned by Cyrus Alexander Elliott and opened in 1848. In the case of this house the Lunacy Commissioners were caught in a double bind. They had made it clear that they approved of single sex asylums, which provided patients with full access to the premises they lived in. On the other hand however they did not want to encourage the establishment of new private asylums, or the precedent of splitting one institution to create two. In the end they reluctantly assented as day to day organisation of the house was placed under Eliza Symmons who had worked at Cowper House since 1833 and was very experienced.

The numbers at Effra vacillated between about 16 and 23, and the Commissioners placed the house in the second class of private asylums, with patients mostly paying under £100 pa. Advertisements for the house stressed the beautiful and secluded surroundings, domestic atmosphere and greater opportunities for recreation because it was single sex. Patients could walk and ride in the country and a cottage was available at Worthing for convalescence. The reality did not always live up to this. Elliott was on several occasions severely admonished for the condition of his premises and in particular the keeping of more disturbed patients in sub standard accommodation at the bottom of the garden. Elliott was also slow to appoint a resident medical officer, and when he eventually implemented this in 1854, a succession of officers passed through at

a rate which disturbed the Commissioners. In 1856 Warren Hastings Diamond (son of Hugh Welch, and member of a family noted for their connection with the insane) became a partner and he remained involved until the 1860s when superintendence reverted to lay hands.

VINE COTTAGE, NORWOOD GREEN (1851 opened)

Opened by a Dr Horsbrugh who first applied for a licence in 1851. He was originally licensed for 7 females, and this was extended to 9 in 1853. There are no details to hand, as yet, to indicate when this asylum closed.

PROVINCIAL ASYLUMS IN SURREY:

LEA PALE HOUSE, STOKE-NEXT-GUILDFORD (c.1700-1879)

In 1700, David Irish, a practitioner in Physick and Surgery, wrote, 'Levamen Infirmi,' a book which was essentially an advertisement for Lea Pale House. He also made mention of another house in his hands at Thorpe, near Egham, which was almost certainly the following asylum in this list, Great Fosters. During the period 1775 to 1800 when local magistrates were expected by law to inspect local madhouses, a Robert Stracey Irish and Mrs Mary Frances Irish were still proprietors of Great Fosters and also of a third house at Frimley, but Lea Pale appears to have passed into other hands.

When Lea Pale was first inspected in 1774 it contained nine female private patients, and from then until 1793 when it closed down temporarily the numbers gradually decreased to 3. At that time the licensees were two spinsters Mary Street and Mary Jellyman, and a Mr John Randall. In 1798 the house re-opened under the ownership of James Stilwell, taking both male and female private patients,

with numbers fluctuating between 2 to 6. By 1826 the numbers had gone up to nine, but in the 1840s there were generally only 4 or 5 inmates and the proprietors were taking more male than female patients, a trend which continued in the 1860s. The Stilwell family were well known for their connection with the mentally ill. When Arthur Stilwell, who ran Moorcroft House Asylum, Hillingdon, died in 1853 the local inhabitants closed up their houses on the day of his funeral as a mark of their respect. (See also George Stilwell under Church Street, Epsom, below). It is clear though that Lea Pale remained a joint venture. In 1817 the license passed to a Thomas Jenner Sells who was in practice with Caleb Woodyer and James Stedman in Guildford, and these gentlemen together with Randall remained connected with asylum until the 1850s. It was James Stedman who was generally the licensee however. The Stedman family appear to have been closely linked with the Stilwells throughout the Home Counties, and often exchanged favours in the running of their businesses. In the 1840s Silas Stilwell Stedman was signing admission certificates for both Lea Pale and Church Street, Epsom and there was a Robert Stedman providing certificates for George Stilwell at the latter house. James Stedman of Lea Pale also signed certificates for George Stilwell, and Arthur Stilwell sent a certain number of patients from Moorcroft House to George's house at Epsom.

Lea Pale finally closed in 1879, but it was always a house that had drawn praise from the Lunacy Commissioners. By and large there was always a core of chronic long stay patients, but increasingly the length of stay of the more acute short stay inmates was reduced as the nineteenth century progressed. (Average length of stay: 1812 to 1828 - 17 months; 1828 to 1845 - 13 months; 1845 to 1851 - 5 months. These figures are based on the record books and certificates

held at the Couty Record Office at Kingston on Thames). There were some very experienced care staff at Lea Pale, and unlike several other private asylums in Surrey 50% of its client population was drawn from the County. In other houses patients were predominantly from outside the county. Throughout its existence Lea Pale had a non resident medical officer, but was visited regularly. This was only acceptable because of the small numbers of patients involved.

GREAT FOSTERS HOUSE, EGHAM (c.1700-1866)

This asylum was one of the most notable old mansions in Egham, situated in 15 acres of grounds. It is traditionally said to have been the hunting lodge of Queen Elizabeth and there was a house on the site from the early 14th century. The asylum almost certainly dates from about 1700 when David Irish had premises at Thorpe, in Surrey, which is where Great Fosters is sited, near Egham. Throughout its history the institution took male and female private patients, with only small variations in the numbers. At the outset there were 20 patients, and it was only in 1853 after pressure from the Lunacy Commissioners that the asylum's numbers were reduced, to about 13, in order to provide more spacious accommodation for the existing patients.

Until 1816 the business was shared between the Irish family (who also opened Frimley House in 1800: see Frimley House) and a local surgeon Richard Brown. It was then sold to a consortium of surgeons, Sir John Chapman, George Furnival and Charles Summers. They formed a limited company and then employed a succession of resident medical officers. (Thomas Phillips 1817-35; Rees LLOYD 1836-53; J S Alger 1854-55; Henry Roberts 1855-1860; Edward James Furnival 1860-1860; Henry William Reid 1860-1866.) During this time

George Furnival's sons Frederick and Edward also joined the partnership.

Statistics from the asylum suggest that almost 80% of patients could expect to be discharged from the asylum eventually, although like most similar institutions there was a chronic population which did not change much over the years. These patients usually died in the asylum. The Lunacy Commissioners main criticism of Great Fosters initially was that too much restraint was used. They also disliked the parsimony of the owners where the fabric of the institution was concerned (It took them several years to persuade the management to provide baths for the patients in the 1850s). The Commission disliked the high turnover of subordinate medical staff and the fact that they were not invested with proper authority to run the institution on their own. In the 1850s it pressed the owners to provide a statement of Dr Roberts' position in the asylum and the same year Shaftesbury was asking for details of the sums received for individual patient care. What is clear is that the owners of the asylum did not have much involvement in its daily running. The asylum finally closed in 1866.

FRIMLEY LODGE, FRIMLEY (1800-1824)

This house was opened in 1800 by Robert Stracey and Frances Irish, and remained open until 1824. It catered for male and female private patients, averaging between three and five patients at one time. Four of the original inmates were transferred directly from Great Fosters, and the certificates of several patients admitted subsequently were signed by surgeons who were in the group which owned Great Fosters. Initially Frimley was criticised by the magistrates because of the lack of attention to hygiene. Also in

1807 the magistrates made Irish pledge that he would discontinue the use of chains and staples. Thereafter until 1822 their main complaint was that it was too cramped for the patients. That year they again complained of the inattention to the patients' cleanliness, but in 1824 the Irishes gave up their licence any way. It seems that this institution took mostly chronic patients.

WESTON HOUSE, CHERTSEY (1815-1821)

This asylum was established in 1815 by James Lucett, surgeon, and was licensed for up to 10 patients. In the previous two years Lucett had gained some notoriety, in conjunction with a partner called Delahoyde, by claiming to have discovered a new cure for insanity. They had hoped to get royal patronage for this scheme. A lot of money was subscribed for an experiment with four lunatics from Hoxton House, who were treated at Sion Vale and Ealing asylums, with a form of treatment which involved bathing the head with cold water, whilst the patient's body was immersed in hot water. This was in fact discredited by a Committee of Inquiry which included the Dukes of Kent and Sussex, and Lucett subsequently moved to Chertsey.

Weston House took both male and female private patients, but only had a resident population of about four, with 22 admissions between 1815 and 1820. The average length of stay of patients was about 7.2 months, suggesting that Lucett was attempting to give his institution a curative emphasis. The house closed in 1821 when Lucett moved his patients to Ewell, and there do not appear to have been any criticisms of the establishment.

THE RETREAT, MITCHAM (1819-1826)

Opened by William Finch in 1819, it seems that this house was intended to take a significant number of patients as it was licensed for over ten. In the event it hardly seems to have attracted any, and in 1825 an institution called The Recovery, Mitcham opened under William Antonio Rocher, at the same time Finch's name disappears from the record books. Presumably he was using the same premises. Rocher did not reapply for a licence in 1826.

EWELL HOUSE (1821-1823)

In 1821 Lucett moved his patients from Chertsey to Ewell, and the magistrates, following directions sent out by the College of Physicians in London (1818), forced him to procure new certificates for all his patients and make a return of the new house. The Surrey magistrates felt that the new premises were inadequate, and in 1823 criticised the neglect of one patient and the fact that patients were allowed to wander in and out of the asylum without the doors being locked. Finally in August of that year Lucett was prosecuted for keeping a patient without a certificate, and his licence was not renewed. Some time later he was committed to the county gaol as a debtor

CHURCH STREET HOUSE, EPSOM (1846-1889)

Founded in 1846 by George Stilwell, this house catered for 6 or 7 private female patients, mostly of the nervous variety. Stilwell and his family lived on the premises and his house is always described as having a domestic quality, the ladies associating together as one family. The only criticisms from the Lunacy Commission seem to have been about the adequacy of Stilwell's medical recording. The asylum closed in 1889.

TIMBERHAM HOUSE, CHARLWOOD (1856-1861)

The first 7 patients in this house were transferred by the Coles from Dartmouth House (see Dartmouth House under Kent Metropolitan asylums) on November the 8th, 1856. Only private male patients were admitted, and the numbers remained at about 7 or 8. Records from the magistrates and Lunacy Commissioners' visits suggest that the asylum was quite open, with patients allowed to go out fishing and for walks on their own in some cases. Also relatives were encouraged to visit as much as possible. Most of the inmates seem to have been longterm cases. The Coles were one of a number of asylum owners who made use of the services of Messrs. Lara and Lane, Medical Transfer and Asylum Brokers. They were heavily criticised by the Lunacy Commissioners in 1856 for selling the goodwill of Dartmouth House to the subsequent proprietor. Generally speaking James Cole did attempt to carry out the Commissioners' requests and his house seems to have been well run. At the beginning of December 1861 the asylum was destroyed by fire, and the surviving patients were transferred to Sussex County Asylum.

LICENSED HOUSES IN KENT

METROPOLITAN ASYLUMS IN KENT

RICHARD HOLT'S HOUSE (1816-1825)

This was opened in 1813 at two cottages near Lewisham clock tower, and subsequently moved to Myrtle Place, Vanbrugh Park, Blackheath in 1816. From 1816-1818 Holt was at 41 Vanbrugh Park and from 1818-1825 at No.43. Holt took paupers from the parishes of Lewisham and Camberwell and some private patients. Throughout the time that the asylum remained open it received unqualified censure from the College of Physicians Visitors because of the appalling conditions in which the inmates were kept. The asylum catered for both male and female patients and the numbers ranged from about 7-12.

DARTMOUTH HOUSE, LEWISHAM (1832-1856)

Originally known as Ravensbourne Terrace, this was another asylum which started in lay hands. Founded in 1832 by James Cole it had an unremarkable history before 1845, slowly increasing from 6 to 10 patients. The premises were moved to Dartmouth House in 1843. The inmates were predominantly male although Cole did take one or two female patients. In 1857 Cole got permission to remove his premises to Timberham House, Charlwood, Surrey. (See under Provincial Asylums in Surrey). By this time his son Henry had qualified as a doctor and joined him as one of the licensees. The numbers of inmates had shrunk to five by 1861, and in December of that year the asylum was destroyed by fire. This institution attracted some criticism in its

early years because of the poor material conditions, but appears to have provided a caring atmosphere for patients.

PROVINCIAL ASYLUMS IN KENT

WEST MALLING

Founded by William Perfect in the mid-eighteenth century (circa 1760). On his death in 1809 he was succeeded by his son-in-law George Perfect who acted as visiting physician and married the daughter of Robert Rix, who took over ownership of the asylum. In 1823 Rix bought Malling Place, a large mansion in West Malling and the asylum was transferred from the Perfect's house in West Malling High Street. Robert's widow Jane succeeded him in 1837 and in 1848 she and her family decided to lease the premises to a Dr Alfred Beaumont Maddock and Henry Brodribb Esq. In 1849 Maddock took over sole responsibility after a quarrel with Brodribb but two years later he was forced to abandon the license after being convicted of malpractise by the Commission. Jane Rix then took over and was followed as licensee by another son-in-law Dr T H Lowry. The latter continued in charge until the 1880's when a family called the Adams bought up the business and continued to run it as an asylum until 1955.

Between 1837 and 1841 the house was licensed for 60 patients, with up to 25 parish paupers. The actual numbers ranged from 53 to 59. By 1845 it contained 42 patients, 12 of whom were paupers, and by 1850 the numbers were down to 27. The following year the asylum stopped taking pauper patients, and by 1860 it only contained 22 patients in the same premises.

WINDMILL TERRACE, MILTON-next-GRAVESEND (1828-1834)

This private asylum was licensed to Mrs. Rebecca Law. The House was capable of taking six patients but usually only contained one or two. She had previously kept patients in the parish of Brompton, Kent. The statutory visits to this house seem to have been more lax owing to its smallness.

TATTLEBURY HOUSE, GOUDHURST (1841-1897)

Founded by Samuel Wilmot Newington in 1841. Samuel was the grandson of Samuel Newington who had founded Ticehurst Asylum four miles away in East Sussex. He followed the family practise by taking a very exclusive set of patients. In addition to accommodating single patients in his family's apartments, he ensured that there was a very high ratio of staff to patients at Tattlebury. Both male and female patients were admitted but the numbers never rose above 6. The Newington family remained in charge of the asylum until the 1890's when its license was eventually surrendered.

The Lunacy Commissioners felt it was only suitable for quiet and orderly patients.

NORTH GROVE HOUSE, HAWKHURST (1843-no date available)

Opened by William Harmer, a layman, in 1843. Harmer had previously cared for single patients. The asylum took private patients of both sexes but remained small, only increasing from five inmates in 1845 to eleven by 1860. From 1845-62 there was undoubtedly a lot of restraint used with the more difficult patients at this asylum. Between 1865 and 1870 Hawkhurst almost doubled in size with extensive grounds provided for the patients, a bowling green and regular carriage rides out. Harmer was eventually

succeeded by his son, who qualified as a physician, and the latter continued to run Hawkhurst into the 1890's. By the early 1880s, North Grove House had been extensively rebuilt, with two detached houses in the grounds for the separate accommodation of wealthier patients. Harmer's son finally removed the asylum to Redlands House, Tonbridge early this century and continued there until 1921. William Harmer always had a good ratio of staff to patients, and employed a surgeon from nearby Cranbrook to provide medical visitation.

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ADVOCACY OR FOLLY: THE ALLEGED LUNATICS' FRIEND SOCIETY, 1845-63

by

NICHOLAS HERVEY*

Some of the names we have seen announced suggest to us the possibility that the promoters of this scheme are not altogether free from motives of self-preservation . . . we think they should be satisfied to take care of themselves, without tendering their services to all who happen to be in the same position. (*The Times*, 27 March 1846.)

Throughout its history, the Alleged Lunatics' Friend Society¹ attracted gratuitous abuse from the popular press and medical journals. It failed to mobilize public support and was constantly treated with disdain by those authorities responsible for the care and treatment of lunatics. Nevertheless, it made a substantial contribution to patients' rights and in many other respects was a distinguished predecessor to organizations such as the Lunacy Law Reform Association,² the National Society for Lunacy Reform,³ and, more recently, MIND. Little has been written about the ALFS and its members, but their interest in the field of mental health was catholic, and their perspective wider than has been generally acknowledged. Kathleen Jones portrayed their activities within a narrow legalistic framework, and suggested that they exaggerated the extent to which sane members of the public were forcibly incarcerated in defiance of the laws.⁴ This opinion has been echoed elsewhere, but does not represent wider aspects of the Society's campaign, which sought to effect changes in the way lunatics were perceived and treated. Parry-Jones did concede that the Society was "not unimportant", but he too saw it as having a circumscribed role related to civil liberties.⁵ The object of this article is to present a more detailed account of the Society,

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¹ Hereinafter referred to as ALFS.

² This association was extremely polemical, and was led by Louisa Lowe, a vicar's wife, who had been incarcerated by her husband because of her spiritualism. She had left him and claimed he was trying to get hold of her property. Founded in 1873, it died out around 1885.

³ This Society started life as the National Council for Lunacy Reform, and was founded following two private conferences on the issue of lunacy reform held at the Minerva Cafe on 29 April and 19 May 1920. Its objects were: to promote research into the causes of mental instability; to investigate the present system of care and treatment, and its results; to secure the provision of hostels for early cases; to safeguard the liberty of the subject; to reduce the burden of ever-increasing asylum expenditure; and to educate public opinion on the subject of mental disorder. It was clearly influential in securing a Royal commission in 1926, and was disappointed by subsequent legislation in 1929. It had branch organizations outside London, and included two members who wrote books on the asylum system, J. E. Parley and Dr. M. Lomax. (There are three minute books for this Society held at the offices of MIND, 22 Wimpole Street, London. It was based in London variously at 32/33 Avenue Chambers, Southampton Row; 90 Avenue Chambers; and 44 Wimpole Street.)

⁴ K. Jones, *Mental health and social policy 1845-1959*, London, Routledge & Kegan Paul, 1960, p. 35.

⁵ William L1. Parry-Jones, *The trade in lunacy: a study of private madhouses in England in the eighteenth and nineteenth centuries*, London, Routledge & Kegan Paul, 1972, pp. 89-98.

its history and aims, and provide a corrective to the view that it had a relatively insignificant impact on the development of nineteenth-century psychiatric practice. It is a mistake to see this organization as solely, or even primarily, concerned with the issue of certification. Certainly, it was anxious to improve some aspects of the admission process. In particular, the Society hoped a jury trial before admission and more detailed medical certificates would prevent collusion in wrongful incarceration of the sane. Equally important, however, were the provision of an effective appeal structure against confinement and automatic review of the necessity for continued detention. Historians, by concentrating on a few noted cases of illegal confinement,⁶ have obscured many important features of the Society's campaign, notably its role as *alter ego* to the Lunacy Commission, its influence on legislative change, its exposure of bad asylums, and its attempt to raise public consciousness of the threat psychiatric practice posed to civil liberties generally.

Before examining these issues further, I shall outline developments before the mid-nineteenth century that constitute a backdrop to public concern about certification, wrongful detention of the sane, and ill-treatment of the insane. Later sections will cover the personnel and objectives of the Society, and its four avenues of campaign: Parliament, the courts, the local magistrates, and public meetings and lectures. Finally, I shall examine the Society's relations with the medical profession and the Lunacy Commission, and assess its contribution to psychiatric practice.

BACKGROUND

In 1763, an article in the *Gentleman's Magazine* mentioned innocents being "decoyed" into private madhouses, "stripped by banditti", and "forcibly reduced by physic". Such emotive language fuelled public disquiet about madhouses and the ease with which unscrupulous parties could confine a person for life, without appeal. Defoe had been among the first to question the practice of these institutions in *Augusta Triumphans* (1728). He attacked the way husbands were able to confine their wives for the most spurious of reasons, and suggested that madhouses should be regularly inspected.⁷ Subsequently, Smollett stoked the fire with his novel, *Sir Launcelot Greaves* (1762). In this, the eponymous hero again complained of illegal confinement, but also of the low-bred, mercenary barbarians who made a living from asylums.⁸ Significantly for future controversy concerning involuntary detention, Sir Launcelot also highlighted the problem of delineating boundaries between sanity and madness, professing that he thought "one half of the nation mad—and the other not very sound". These boundaries were shifting, as MacDonald has shown, with the educated élite gradually abandoning their beliefs in divine inspiration and demonology during

⁶ The cases of Turner, Leech, and Ruck in 1858 have been widely quoted, and also that of Frederick Windham in 1861. See J. L. and B. Hammond, *Lord Shaftesbury*, London, Constable, 1923, pp. 204–208. Also. P. McCandless, 'Liberty and lunacy: the Victorians and wrongful confinement', in A. Scull (editor), *Madhouses, mad-doctors and madmen: the social history of psychiatry in the Victorian era*, London, Athlone Press, 1981.

⁷ D. Defoe, *Augusta Triumphans: or, the way to make London the most flourishing city in the universe*, London, 1728, pp. 30–34. The history of ex-patients campaigning against the practices of madhouses also started at this time. See A. Cruden, *The London citizen exceedingly injured: or a British inquisition display'd*, London, T. Cooper, 1739.

⁸ T. Smollett, *The adventures of Sir Launcelot Greaves*, London, 1762, vol. 2, pp. 228–230.

the late seventeenth and early eighteenth centuries.⁹ As madness increasingly fell within the purview of physicians, rather than lay and clerical healers, the former became recognized as the major group defining and legitimating insanity, even though they still had no official status in that respect. As the number of madhouses grew, the need for an official group to carry out identification and committal procedures became increasingly evident.¹⁰

Following earlier misgivings about private asylums, an Act of 1774 prescribed a rudimentary certification system. This applied only to private patients, leaving paupers unprotected.¹¹ The new law empowered anyone declaring himself to be an apothecary, surgeon, or physician to sign a certificate, but many of these men were unqualified and inexperienced. Indeed as late as 1850, many medical men had little or no experience of mental illness, and civil libertarians became increasingly worried by this. McCandless's work has admirably illustrated that the conspiracy theory of illegal confinement does not stand up to investigation in most cases.¹² Lord Shaftesbury,¹³ Chairman of the Lunacy Commission, always felt that there were few deliberately engineered confinements of the sane, and it was probably only the press that suggested otherwise. McCandless has demonstrated that most dubious confinements were the result of ignorance, incompetence, or carelessness. One exception to this rule was the certification of sane persons to help them escape the rigours of the criminal law,¹⁴ and more often than not this was inspired by motives of humanity to prevent a sentence of capital punishment being carried out.¹⁵

It was not these cases which worried civil libertarians, but those that illustrated the incompetence of medical practitioners as diagnosticians. Many doctors relied too heavily on subjectively determined symptoms when deciding whether or not to certify.¹⁶ The cases cited by McCandless show that evidence of mad behaviour given in

⁹ M. MacDonald, *Mystical Bedlam: madness, anxiety, and healing in seventeenth-century England*, Cambridge University Press, 1981, *passim*.

¹⁰ For a description of this process see D. J. Mellett, *The prerogative of asylumdom*, New York, Garland Press, 1983, introduction and pp. 187–210. Also, A. Scull, *Museums of madness: the social organisation of insanity in nineteenth-century England*, London, Allen Lane, 1979, ch. 5.

¹¹ 14 Geo III c49 s27. The orders for confinement were only signed by one medical man, but the penalty on the madhouse owner for receiving a patient without this order was £100. Under s1, the penalty for detaining more than one patient without a licence was £500.

¹² P. McCandless, 'Insanity and society: a study of the English lunacy reform movement 1815–1870', PhD thesis, University of Wisconsin, 1974. Also *idem.*, *op. cit.*, note 6 above.

¹³ Anthony Ashley Cooper, 7th earl of Shaftesbury (1801–85), chairman of the Metropolitan Lunacy Commission 1833–45 and of the Lunacy Commission 1845–85; commissioner on the Board of Health, 1848–54. See *DNB*; G. B. A. M. Finlayson, *The seventh earl of Shaftesbury*, London, Eyre Methuen, 1981.

¹⁴ For a good example see PRO/HO45/OS/5521—the case of the Rev. Edmund Holmes, member of a noted county family in Norfolk, who was certified to prevent his prosecution for the attempted violation of a twelve-year-old girl.

¹⁵ For contemporary concern with this issue, see C. M. Burnett, *Crime and insanity: their causes, connexion and consequences*, London, 1852. Also, R. Smith, *Trial by medicine: insanity and responsibility in Victorian trials*, Edinburgh University Press, 1981, pp. 21–22.

¹⁶ Although the 1845 Care and Treatment of Lunatics Act laid down certain inquiries which should be made on admission, there was no equivalent of the modern mental state examination. For examples of subjectively determined symptoms, see McCandless, *op. cit.*, note 12 above, pp. 166–203. PRO/HO44/31 letter from Perceval to the Home Secretary, Lord Normanby, 5 April 1840. Perceval remarked of doctors, "there is usually much presumption and much false reasoning, craftily blended with unquestionable truths, in their statements."

testimony before the *Commissions de lunatico*¹⁷ often confounded immorality, eccentricity, and other non-conformist behaviour, with insanity. These opinions were sometimes rejected by lay juries, which undermined medical credibility; the unedifying sight of medical witnesses giving diametrically opposed evidence as to a person's mental state further reduced public confidence. It was for this reason that libertarians argued that unless a person was obviously a danger to himself or others, he should not be confined. However, the medical profession wished to establish their position as sole arbiters of normalcy in this process, and many doctors unwisely claimed special ability in detecting the fine shades between sanity and madness.

This claim assumed prominence, as Roger Smith has demonstrated,¹⁸ when medical testimony was employed in trials of the criminally insane. Here, conflict between medical and legal discourses centred, not only on the existence of insanity, but on whether a lunatic could be responsible for his actions. There was widespread concern that alienists, with their physicalist and hereditarian assumptions about aetiology, were creating the impression that individuals could not be held responsible for seriously violent or socially unacceptable behaviour, once the disease of insanity had set in. Clearly, this perspective, expressed through the insanity defence, undermined the concept of responsibility and posed a threat to the retributive and moral functions of the law. Jurists attacked the plea as the first step on a slippery slope to moral anarchy. Civil libertarians were not particularly interested in the insanity defence, but fervently believed in a much greater degree of self-determination and responsibility for the insane. In 1851, they were full of praise for the Lunacy Commission when it persuaded an appeal court to accept the testimony of lunatics in murder trials.¹⁹ Their fear was that the increased use of asylum detention for lunatics was gradually eroding their rights within the law. There is not room here to enter the debate on the sudden "visibility" of insanity in the late eighteenth century, but contemporaries did perceive a problem in the growing number of insane,²⁰ and the asylum appeared to provide a solution. Expansion of the county asylum system has been represented as part of a wider drive to incarcerate the poor and disadvantaged.²¹ It certainly offered opportunities for medical superintendents to consolidate their position and for the

¹⁷ See pp. 265–266 for a description.

¹⁸ Smith, *op. cit.*, note 15 above. Civil libertarians were in a quandary with the insanity defence, as they generally argued for a greater degree of responsibility for the insane. There is no evidence that they ever took much interest in the insanity defence, but they were involved in campaigning to improve the conditions of criminal lunatics once confined. See footnote 170 below.

¹⁹ Commissioners in Lunacy, *Sixth report*, pp. 17–18. The prosecution of attendant Samuel Hill was completed when Lord Justice Campbell agreed to accept the evidence of a patient, Richard Donnelly. Campbell argued that, "the proper test must always be, does the lunatic understand what he is saying, and does he understand the obligation of an oath?"

²⁰ Richard Powell, *Observations on the comparative prevalence of insanity at different periods*, London, Woodfall, 1813; Sir Andrew Halliday, *A letter to Lord Robert Seymour: with a report on the number of lunatics in England and Wales*, London, Underwood, 1829. The problem continued to puzzle commentators into the mid-nineteenth century. See John Thurnam, *Observations and essays on the statistics of insanity*, London, Simpkin Marshall, 1845; and W. A. F. Browne, *What asylums were, are, and ought to be*. Edinburgh, 1837, pp. 50–55.

²¹ Scull, *op. cit.*, note 10 above; and Mellett, *op. cit.*, note 10 above. Many contemporaries identified this process too, and not just libertarians. See the Annual Report of Kent County Asylum Superintendent, J. Huxley, in 1861/2, p. 20.

Lunacy Commission to develop. Both had a vested interest in more asylums, and both undermined traditional forms of care within the family by stressing the need for early removal from the home environment.²² This trend worried libertarians, who disliked the ease with which behaviour was being defined as sufficiently disturbed to justify detention, and questioned the benign view reformers had of the new asylums.

In the past two decades, a new tradition in psychiatric history has undermined previous accounts of a progressive scientific objectivity and humanitarianism in treatment. Foucault²³ questioned the benevolent light in which Tuke's moral treatment at York had been cast, and subsequently, Rothman and Scull have explored the element of social control inherent in the establishment of asylums, identification of patients, and their treatment.²⁴ These studies suggest that we may need to look more closely at how patients' freedoms were compromised as a new system of care evolved.

It is evident that by 1850, despite continuing fears of illegal confinement, most Victorians supported involuntary detention, fearing the consequences of allowing lunatics to remain at large. The problem remained how to feel secure that the right people were being confined, and it was not clear whether the medical profession could be entrusted with this decision. Wilkie Collins, Henry Cockton, and Charles Reade, heirs to Defoe and Smollett,²⁵ all fed public uncertainty with their novels, drawing on the well-publicized periodic lunacy scares.²⁶ They cast doubt on the motives of asylum proprietors and highlighted the way doctors made arrangements to supply particular asylums with patients.²⁷ Only stringent certification procedures, better qualified doctors, and regular asylum visitation could redress abuses in the system, but their preoccupation with wrongful confinement prevented a more sophisticated analysis of the way mad people were perceived and treated.

Select committees before 1827,²⁸ which uncovered significant abuse of patients, did

²² R. G. Hill, *A lecture on the management of lunatic asylums*, London, 1839, pp. 4–5; Commissioners in Lunacy, *Further report*, 1847, pp. 118–119.

²³ Michel Foucault, *Madness and civilization*, London, Tavistock, 1979, ch. 9. Foucault's suggestion that mechanical restraint had merely been replaced with more terrifying internal restraints that patients were asked to impose on themselves through the internalization of society's values, is similar to the feeling many libertarians expressed.

²⁴ Scull, *op. cit.*, note 10 above; and David Rothman, *The discovery of the asylum*, Boston, Mass., Little Brown, 1971. Rothman's critique of Jacksonian society and attempt to separate the American experience from Europe's, are less convincing. See A. Scull, 'The discovery of the asylum revisited: lunacy reform in the new American republic', in Scull (editor), *op. cit.*, note 6 above. The idea that causal links between the increasing "civilization" of society and the growth of insanity remained popular amongst alienists in America after its disappearance in Britain, is untrue. Civil libertarians including the ALFS, certainly posited a link between the two in nineteenth-century England.

²⁵ Wilkie Collins, *The woman in white*, London, 1860; Henry Cockton, *Valentine Fox*, London, 1840; Charles Reade, *Hard cash*, London, Routledge, 1905 (1st ed., 1863).

²⁶ Reade resented suggestions that he merely relied on sensationalized newspaper accounts for his novel. In an article to the *Daily News*, 23 October 1863, he stated that he relied "mainly on the private cases, which a large correspondence with strangers, and searching inquiry amongst my acquaintances have revealed to me . . . to show you how strong I am, I do not rely at all on disputable cases like Nottidge, Ruck and Leech." From the range of cases he mentions in this article and a subsequent one to the *Pall Mall Gazette* (17 January 1870), he had evidently gathered a wide range of material.

²⁷ See the case of George Boddington, MD, in PRO/HO45/OS/6686, mentioned in McCandless, *op. cit.*, note 6 above. Also *Br. med. J.*, 1857, i: 52, for an example of advertising for this kind of arrangement.

²⁸ In 1807 and 1815/16.

not lead to controls,²⁹ and safeguards instituted in 1828 were woefully inadequate. The Metropolitan Lunacy Commission provided a more efficient inspectorate in London, but elsewhere local magistrates continued to be responsible for licensing and visitation. Certificates were at last introduced for paupers, and those for private patients improved, but in practice many of the new provisions proved worthless.³⁰ Madhouse owners continued to certify their own patients,³¹ and the process for discharging those held illegally was unnecessarily cumbersome.³² In the provinces, justices sometimes failed to visit asylums at all, or made only the most perfunctory inspections. Reforms were clearly needed, and a full-time Lunacy Commission was set up in 1845, under the Care and Treatment of Lunatics Act. This will be discussed later, but it is important to acknowledge here the failure of previous administrative measures to protect patients' rights. Civil libertarians certainly wished to point out loopholes in the law that could lead to wrongful confinement, but increasingly they became concerned at the way mental illness was perceived in Victorian society, and the implication that custodial care was the only really appropriate way to treat the insane. We must now turn to a closer examination of their contribution.

"A NUCLEUS ATTENDED BY A SPLENDID TRAIN OF SUPPORTERS"³³—THE PERSONNEL, OBJECTIVES AND PHILOSOPHY OF THE SOCIETY

In 1838, Richard Paternoster, a former clerk in the Madras Civil Service was released from Dr Finch's madhouse at Kensington after a confinement of forty-one days.³⁴ His seizure and detention had followed disagreement with his father over money. On discharge, he advertised in *The Times* for fellow sufferers to join him in a campaign to redress abuses in the madhouse system. He was joined by four men initially, the most important of whom was John Thomas Perceval the fifth son of the assassinated prime minister, and younger brother of Spencer Perceval, the

²⁹ A series of bills were put forward between 1813 and 1819, which are worthy of closer examination on the lines O. MacDonagh employed in his study of the Passenger Acts. The clauses proposed included the tightening up of medical qualifications for those signing certificates and the appointment of specially approved doctors for the purpose. Many other ideas were lost, only to be laboriously rediscovered by later administrators, or form part of the ALFS's campaign. PP 1813–14 (204), 1, 411, p. 16 and (267), 1, 439, Clause D.

³⁰ A non-pauper could only be admitted on the certificates of two doctors, who had visited him separately within fourteen days of each other. A pauper could be admitted on the order of two JPs, or of an overseer and the officiating clergyman of the parish, accompanied in either case by a certificate signed by a doctor. The Act also prohibited doctors certifying patients for any asylum in which they had a financial interest or of which they were regular medical attendants. 9 Geo IV, c41, ss XXX and XXXI.

³¹ In Kent, a county where the magistrates did visit, admission records for West Malling Madhouse illustrate this. Between 1828 and 1834, George Perfect, visiting medical officer, who had a financial interest in the asylum, signed four certificates of admission. Kent CRO/QALp/5.

³² 9 Geo IV c41 s37 dictated that twenty-one days elapse between each of three visits to the patient before he could be discharged. As the magistrates only inspected four times a year, this could mean at least 4½ months' confinement before discharge if a patient was admitted soon after their visit.

³³ *The Times*, 16 April 1846.

³⁴ Richard Paternoster, described as "an uncorrected heartless ruffian . . . low in mind and coarse in language" by Shaftesbury, was only discharged by the Metropolitan Lunacy Commissioners on a split vote of 6 to 4. (Diaries of the 7th earl of Shaftesbury, National Register of Archives, SHA/PD2, 3 October 1838.) Paternoster subsequently wrote *The madhouse system*, London, 1841. For further details see Parry-Jones, *op. cit.*, note 5 above.

Metropolitan Lunacy Commissioner.³⁵ Both John and Spencer adopted their father's evangelical fervour, and in 1830 joined the Irvingite Church.³⁶ The following year, John became involved in the miracles at Row, where he witnessed talking in tongues and other strange phenomena. Even at this stage, fellow community members felt his behaviour was erratic and unpredictable. In December 1831, he went to Dublin where he developed an acute psychotic illness. Spencer arranged his return from Ireland and placed him at Brislington House, a private asylum in Bristol, run by Edward Long Fox. It had been purpose-built as a madhouse and was known as one of the foremost institutions of its kind. Dr Fox, a Quaker, had even been invited to treat George III, such was his reputation, and yet Perceval had hardly a good word to say about the asylum.³⁷ In 1832, he was moved to Ticehurst, in Sussex, another private asylum, which enjoyed an even higher reputation, treating many members of the aristocracy. He remained there until his discharge in 1834.³⁸

Perceval claimed that his care in these asylums, especially at the former, had been barbarous. He alleged that he was forced to use a clyster in his brother's presence, was kept in a strait-waistcoat, was hit around the head, pulled by the nose, and had his hair cut in a ludicrous fashion.³⁹ Both Paternoster and Perceval published accounts of their experiences. These were to prove a handicap to the ALFS because they alienated the medical profession. The main thrust of Perceval's argument was that Fox had not treated him as a gentleman or an individual. He was barred from any discussion about his treatment, and when he challenged Fox's methods he was punished with solitary confinement, the strait-jacket, or a cold bath. Clearly, Perceval had been very disturbed on admission, but this does not invalidate his criticisms, which illustrate the lack of dialogue between doctor and patient. He and Paternoster also upset the Metropolitan Lunacy Commission and local magistrates by exposing frailties in the inspectorial system. In 1840, Perceval wrote that magistrates "know what gentlemanly feeling is, and the wants of a gentleman, and yet, year after year they visit the asylums in which patients are, and see the painfully indelicate situation in which they are placed, and yet do not once take pains to put themselves in the patient's place and ask themselves how they would like to be treated even for a week . . . in the same

³⁵ See Richard Hunter and Ida Macalpine, 'John Thomas Perceval (1803-76), patient and reformer', *Med. Hist.*, 1962, 6: 22-26. Perceval was author of: *A narrative of the treatment experienced by a gentleman during a state of mental derangement*, 2 vols., London, Effingham Wilson, 1838 and 1840; *Letters to Sir James Graham upon the reform of the law affecting the treatment of persons alleged to be of unsound mind*, London, 1846; *A letter to the Secretary of State for the Home Department upon the unjust and pettifogging conduct of the Metropolitan Commissioners in Lunacy in the case of a gentleman lately under their surveillance*, London, 1844.

³⁶ The Catholic Apostolic Church was founded in the late 1820s, and inspired by the teachings of Edward Irving (1792-1834). It developed from a revivalist circle which gathered round Henry Drummond (1786-1860), who built a church on his estate at Surrey. Drummond was a keen supporter of the ALFS.

³⁷ Edward Long Fox 1761-1835. MD Edinburgh 1808, MD Oxford 1835. Physician to Bristol Royal Infirmary 1816-43; 1792-1804 proprietor of Cleeve Hill Madhouse; 1804-35 proprietor of Brislington House. For invitation to treat George III, see *Bristol Evening Post*, 23 March 1960, p. 8. Also Parry-Jones, *op. cit.*, note 2 above, chs. 3 and 4.

³⁸ For details see *ibid.* Also, C. Mackenzie, 'Social factors in the admission, discharge and continuing stay of patients at Ticehurst Asylum, 1845-1917', in W. F. Bynum, R. Porter, and M. Shepherd (editors), *The anatomy of madness: essays in the history of psychiatry*, 2 vols., London, Tavistock, 1985.

³⁹ Perceval (1838), *op. cit.*, note 35 above, pp. 12-22. Perceval also claimed he was denied paper for the privy, and saw keepers half-strangling another patient.

manner.”⁴⁰ Many considered that Perceval had broken ranks in thus exposing his own class, and Lord Raglan remarked that it was evident he did not care what he said. Shaftesbury, a Harrow contemporary of Perceval’s, also felt that he was telling tales out of school and remained reluctant publicly to acknowledge his existence thereafter.⁴¹

Paternoster and Perceval were joined in 1839 by William Bailey, an inventor who had spent five years in madhouses,⁴² Captain Richard Saumarez, RN,⁴³ who had two insane brothers under the court of Chancery, and Dr John Parkin,⁴⁴ another ex-patient. This group petitioned the Home Secretary, Lord John Russell, to discover what measures the government were drawing up to reform the existing laws.⁴⁵ Having received the reply that he could offer them no information on the subject, they began their campaign to secure a Select Committee. Successive Home Secretaries were bombarded with advice, petitions, and legislative proposals,⁴⁶ and the help of radical MP Thomas Wakley⁴⁷ was enlisted. In 1842, they provided the only challenge to Granville Somerset’s bill widening the scope of the Lunacy Commission, arguing that it was asking an inefficient body to report on its own proceedings. They suggested the Commission was bound to give a favourable account of its own efforts, and recommended an independent inquiry. By 1845, with the virtual reappointment of the old Commission, it had become clear that the group required a greater degree of organization. A meeting was arranged for 7 July 1845, at which a permanent,

⁴⁰ Ibid., p. 6.

⁴¹ PRO/MEPOL3/20. Raglan to R. Mayne, Commissioner of Police, 44 May 1850. Perceval had admitted as much in 1846 in a letter to Peel, stating that he had expressed his opinions “without respect to persons or to my future prospects—and this is my only merit.” (British Museum, Add.MSS, Peel Papers, 40,582, f 91.) He continued the school allusion in 1861, remarking of Shaftesbury’s Commission, which allowed the withholding of patients’ correspondence: “I feel so indignant at this under the plausible superintendence of Lord Shaftesbury—that I sometimes can scarcely believe that he is the man that was educated with us at Harrow—that gentlemanly and public spirited school.” (PRO/HO45/OS/7102, Perceval to George Clive, 9 May 1861.)

⁴² For an account of William Bailey, see his petition to the Commons, HC, Supplement to the Votes 1845, Vol. 2, pp. 1144–1145. Also Perceval (1846), op. cit., note 35 above, letter concerning a Mr B[ailey]. Bailey was also an overseer in the parish of St Giles-in-the-Fields and as such was involved in care of the pauper insane.

⁴³ Richard Saumarez 1791–1866. (Son of Richard 1746–1835, the surgeon and prolific polemical writer on medical education and the duties of medical corporations.) Town Councillor at Bath; guardian of St Luke’s, Chelsea; FRS. Author: *An address on the laws of lunacy for the consideration of the legislature*, London, 1854; *The laws of lunacy, and their crimes, as they affect all classes of society*, London, 1859.

⁴⁴ John Parkin MRCSE 1822, Fellow Royal Medical and Chirurgical Society, London; surgeon in the East India Co., surgeon to the General Annuity and Endowment Association, fellow member of Perceval’s at the Parthenon Club, Regent Street. Author of papers and books on tropical disease and the state of the profession.

⁴⁵ PRO/HO44/33, letter to Russell, 30 January 1839. In fact, Perceval had been in trouble with the Home Office before this for literature distribution calculated to inflame the lower orders. (HO40/40, 20 June 1838.)

⁴⁶ HO 44/49, Perceval to Normanby 5 April 1840; BM, Add.MSS, Peel, 40426, f243, 8 May 1839, Perceval to Peel; and 40523, f 397, 26 January 1843, Saumarez to Peel. In 1839, there were petitions from Perceval, Saumarez, and the Parish of St Luke’s, Chelsea. Perceval and Bailey petitioned in 1842, and in 1845, there were seventeen petitions inspired by this group.

⁴⁷ Thomas Wakley (1795–1862) MRCS 1823. Founded the *Lancet* in 1823. MP Finsbury 1823–62. Middlesex Coroner 1839–62. Wakley had a particular interest in this subject, because he had a nephew, Mr Townsend, who had been confined at Southall Park asylum. (Diaries of Alexander Morison, Royal College of Physicians of Edinburgh, 24 April 1849.)

non-sectarian, and apolitical organization was established. The objectives that emerged during the first year were: to campaign for changes in the lunacy laws, which would reduce the likelihood of illegal incarceration and improve the condition of asylums; to offer help to discharged patients, and to convert the public to an enlarged view of Christian duties and sympathies. Most important of all, the Society announced it would henceforth exist to forward any matters the Commission might overlook.⁴⁸ This superior attitude did not endear the Society to the public, and its extensive brief was undermined by strategical errors. First, by making the unfortunate antecedents of several of its members a matter for pride, rather than distaste, the Society reduced its credibility as a rational force. In addition, its fearless exposure of upper-class sensibilities regarding the privacy of this subject intimidated the very groups that normally patronized charitable organizations. It also became a matter of principle that the stigma attached to ex-asylum inmates should never be a barrier to normal integration. Perhaps the situation demanded the adoption of this more extreme position but the Society's hard-line approach was compounded by a further error of judgement: alignment with radical political circles, which reduced its support both in and out of parliament. Finally, its endorsement of localist views, such as those held by Toulmin Smith, antagonized the Lunacy Commission, which was committed to setting up a central repository of expertise in this field.⁴⁹ Thus the Society's ends were often hampered, if not defeated, by its means, although this explanation for its failures does not do justice to the opposition generated by the novelty of its proposals.

The general philosophy of the ALFS stemmed from traditional appeals to Anglo-Saxon law, Magna Carta, the writings of Edward Coke, and more controversially, Paineite concerns with the right of individuals to certain inalienable freedoms within the welfare of society as a whole.⁵⁰ Each patient should have a voice in his confinement and care, and access to legal representation. Perceval led the way, attacking the new forms of moral treatment as an imposition of society's values on the individual. In 1845, he remarked, "the glory of the modern system is repression by mildness and coaxing, and by solitary confinement." He expressed suspicion of the tranquility so frequently admired by the Commissioners in asylums, and suggested that patients were first crushed, "and then discharged to live a milk sop existence in

⁴⁸ In 1859, Perceval stated that the foundation of the Society was chiefly due to Mr Luke Hansard. An examination of the Hansard Papers suggests that Luke may have had a daughter or a daughter-in-law called Mary Ann who was mentally disturbed and boarded with a Mrs Aveling. (Hansard papers, Southampton University Library, Accts and MSS, LF 780 Uni/103.) The information about the ALFS's aims is taken from a pamphlet dated 1846. Several sources including Jones (op. cit., note 4 above) and Parry-Jones (op. cit., note 5 above) quote the Society as producing pamphlets in 1851 and 1858. Pamphlets for 1846 and 1849 have also been found to date. These and the pamphlet dated 1851 are to be found in the Forster MSS, Victoria and Albert Museum, Pamphlet Collection.

⁴⁹ Perceval (1846), op. cit., note 35 above, letter dated June 1844. Perceval wrote, "for my own part I do not approve of Commissions of this kind, for the administration of the laws of this country, more particularly where they interfere with the ordinary channels of government."

⁵⁰ PR0/H045/OS/7102 Perceval to George Clive, 2 May 1861, appeal to Magna Carta and the universal meaning of laws as found in Montesquieu. For comparison, see the petition of William Morgan to the House of Lords in 1847 (JHL, LXXXIX, 1847, p. 159). There is an interesting discussion of the appeal to traditional constitutional rights, especially in the context of opposition to central government, in William Lubenow, *The politics of government growth: early Victorian attitudes toward state intervention, 1833-48*, Devon, David & Charles, 1971, *passim*.

society".⁵¹ The ALFS adopted this stance too. Its first prize essay was offered for a treatise to illustrate ways in which the influence of role and conduct in society created "irritations of the Will in individuals". In 1846, the Society's initial report also reflected this preoccupation, referring to the public's condescending attitude and servile imitation of society's rules and orders, "being supposed to form and constitute them part of the sane world, entitled to sit in judgment."⁵² These attitudes reflect the presence of a number of ex-patients within the Society. The Society believed that much mental illness stemmed from the disappointments and rejections of life, and questioned the medical wisdom that patients had to be isolated from their home associations, desiring practitioners to pay more attention to what the insane were saying.⁵³ The Society was keen to combat the message of moral treatment, which, in implying that the mad needed re-education, perpetuated the status they had often been afforded in the past as a protective device, namely, that of children.⁵⁴ All its proposals bespeak the desire that, whenever possible, lunatics should be treated as adults capable of making decisions for themselves. Perceval certainly believed that more rights of appeal should be built into detention procedures and felt patients were generally kept ill-informed of their legal position. In 1859, he also suggested that they were rarely given the chance to exercise their will or judgement, which had a very material effect in impeding their recovery.⁵⁵

The adherents acquired in 1845 generally endorsed the above beliefs, and did not therefore provide a more socially acceptable membership. It is not clear how many ordinary members the Society had,⁵⁶ but there were eighteen vice-presidents, and seventeen directors, many of whom took an active role. Several of these were noted for the singularity of their views. The MPs Thomas Wakley, Thomas Duncombe, and William Sharman Crawford might have received support for their opposition to the New Poor Law⁵⁷ and other centralist government agencies, but their radical politics and involvement with the Chartist movement helped brand the Society as "unsafe". Despite the apolitical tag and an even complement of whig/radical and tory MPs,⁵⁸ the

⁵¹ Perceval (1846), op. cit., note 35 above, 1 August 1845; Cf. Foucault, op. cit., note 23 pp. 241–278.

⁵² ALFS, 1st report, *Origin, progress and expenditure of the Society, with its laws and regulations*, London, W. McDowell, 1846, pp. 1–4.

⁵³ For removal from home, see E. J. Seymour, *Thoughts on the nature and treatment of several severe diseases of the human body*, London, Longman Green, 1847, pp. 170–220. Seymour opposed this, but made it clear it was axiomatic amongst his contemporaries. For discussion, see Scull, op. cit., note 10 above, pp. 90–102. Perceval, (1840), op. cit., note 35 above, pp. XVIII.

⁵⁴ See N. Walker, *Crime and insanity in England*, Edinburgh University Press, 1968 ch. 2; and Smith, op. cit., note 15 above, pp. 70–74, for discussion of the exemption of madmen from the consequences of the criminal law, which was linked to the age of discretion in children.

⁵⁵ Report of the Select Committee on Lunatics, PP 1859, Sess. 2, VII, p. 20.

⁵⁶ It is true that the Society was not well supported, but those who did help were often influential. In addition to their own MPs, the ALFS received regular assistance from the following liberal-minded parliamentarians: Lord Dudley Stuart (Marylebone), Charles Lushington (Westminster), Benjamin Hawes (Westminster), Bernal Osborne (Dover), Lord Duncan (Bath), Sir William Tite (Bath), Mr Mitchell (Bodmin), and Henry Drummond (Surrey). The Society probably had no more than 50–60 members.

⁵⁷ A number of members, including Perceval, Saumarez, and Bailey who were local Poor Law officials, shared this perspective. Perceval wrote to several MPs about the iniquities of separating man and wife in the workhouse in contempt of the solemn rites of the marriage ceremony, and the Society extended this to a condemnation of separation within asylums. (BM, Peel Papers, Add.MSS, 40,558, f 450, Perceval to Peel, 31 January 1835.)

⁵⁸ About eight of each.

greater commitment of the former group gave the Society a decidedly liberal character. In fact, the conservative element tended to become influenced by its freethinking ideology and was criticized for it. In February 1859, the *Morning Post* reported a meeting chaired by the MP Benjamin Bond Cabbell, at which several ex-patients from Hanwell, Colney Hatch, and Surrey County Asylums made serious allegations about abuses in those institutions. The *Post* added, "Mr Cabbell will not forward the cause he professes to advocate by listening without protest, as chairman, to such evidently false accusations."⁵⁹ Similarly, Cabbell and R. A. Christopher⁶⁰ presented bills in Parliament full of major departures from traditional policy, which they might have avoided in considering other subjects.

However, the new members did provide useful links in many spheres that involved the insane, not least Cabbell and Christopher at Bethlem.⁶¹ These links will be examined later, but it is clear that the different views members brought with them were potentially divisive. The most important new member in this respect was Gilbert Bolden,⁶² a lawyer who drew together disparate elements within the Society. He eschewed the extremists and those pursuing personal interests, and attempted to obtain a common set of demands which would have a wider appeal. For the Lunacy Commission he was, potentially, the most dangerous member of the Society, as it proved less easy to dismiss him as a firebrand, and he was not identifiable for previous activities. But Bolden had his hands full as the initial group of campaigners expanded.

During the early years, Perceval was still adjusting to personal psychiatric problems and his constant references to religion were deprecated by Saumarez, who felt they "damaged the cause". But Perceval was unrepentant, believing that the Church had abandoned this issue owing to its social delicacy.⁶³ He continued to advocate greater clerical involvement in the care of the insane, and his views were in time accepted to some degree by the others. Disagreement also emerged over an issue generally taken as axiomatic to the Society's philosophy, the abolition of private asylums and lodgings. Despite his own experience, Perceval remained true to his background and believed that gentlemen should be provided with care commensurate with their station in life, private lodgings with personal attendants.⁶⁴ Barring this, moral treatment and

⁵⁹ *Morning Post*, 3 February 1859.

⁶⁰ Benjamin Bond Cabbell 1781–1874. MP St Albans 1846–7, Boston, Lincolnshire 1847–57; FRS 1837. Robert Adam Christopher 1804–77. MP City of Edinburgh 1831–2, North Lincolnshire 1837–57; FRS 1833; PC 1852.

⁶¹ Cabbell was also a governor of St Luke's Hospital. Drummond was a Surrey County Asylum Visitor. Not all the new adherents were an asset, however. Viscount Lake 1781–1848, for instance, had been dismissed from the Navy for gross cruelty. He did not appear to take any part in the Society's activities. The ALFS did try to recruit members who would lend real weight to their campaign. (See Royal Society Collection: Sir John Lubbock's Papers, LUB/A/213, letter from Luke Hansard to Lubbock, 19 August 1845.)

⁶² Gilbert Bolden 1801–64. A London solicitor, Bolden was admitted to the Roll of Michaelmas 1834. Initially, he practised in Bloomsbury, and in 1841, moved to Westminster. In 1844, his address was suddenly given as Country Attorney, Walton, Lancashire, and it is just possible that he was an inmate of the asylum there at this time. Subsequently, his address was at Craven Street, home of the ALFS.

⁶³ PRO H045/0S/7102, Perceval to the Home Office in 1861 concerning proposed lunacy legislation. Letter to George Clive, 4 April 1861.

⁶⁴ PP 1859, Sess. 2, VII, p. 43. For a description of the system of single lodgings, see N. Hervey, 'A slavish bowing down: the Lunacy Commission and the psychiatric profession 1845–60', in Bynum *et al.* (editors), *op. cit.*, note 38 above.

non-restraint were best when modified and perfected in private asylums, rather than large public institutions. This ran against the current of opinion in the Society. Perceval however, saw clearly the weakness inherent in Shaftesbury's budding County Asylums. He felt small private asylums might be improved by placing them in government hands, but remarked of public asylums as early as 1843, "I do not think it likely a system carried out by public officers will improve so readily as one carried out by private hands . . . I do not think a public system will be so easily impugned or corrected as a private one, should abuses creep into it."⁶⁵

As other members of the society came into contact with the public sector, they too adopted Perceval's views of the need to perpetuate and improve the private sector. The Society also spent a lot of time representing pauper interests, sometimes through specific cases,⁶⁶ but more often through the global rights it advocated. The difficulty arose from the fact that these rights were located at the interface of medical professionalism, government growth, and individual freedoms. The Lunacy Commission, although ceding a large measure of control in county asylums to the superintendents, was anxious to retain an ultimate veto on medical activities. This should have given it some sympathy with the Society's views, but whilst it was true that individual Commissioners supported aspects of the Society's programme,⁶⁷ the Board was wary of alienating the medical profession by curbing its powers in favour of patients' rights. Some of the ALFS's ideas, such as termination of the medical officer's power to detain pauper lunatics in a workhouse without any legal documentation, were taken up by the Board, but these were often issues which caused conflict between doctors and other members of the Society. The former comprised a small, but influential group, who were nearly all involved in expanding the role of their profession. Some concession had to be made to their opinion.⁶⁸ It was not so much these internal differences that handicapped the Society, as the determined opposition to their views from various vested interests, and we must now turn to an examination of their strategy and achievements.

⁶⁵ Perceval, (1846), op. cit., note 35 above, letter dated 25 January 1843. See also letter dated 31 January 1843, "I am convinced that the collecting of lunatic patients together is a necessity to be deprecated, rather than a principle to be admitted."

⁶⁶ The Society worked on many cases in county asylums and workhouses, appointing their own visitors to investigate charges. It supported the foundation of charitable funds like the Queen Adelaide's at Hanwell (to which both Cabbell and Saumarez contributed) and it provided ex-pauper patients with references for jobs. ALFS, 1st annual report, pp. 1-2.

⁶⁷ Samuel Gaskell (1807-96) supported the idea of voluntary admissions (*J. Ment. Sci.*, 1860, 6: 321-327), as did Bryan Waller Procter (1797-1874). See V & A, Forster MSS, 48 E 32, Procter to Forster 5 September 1869. W. G. Campbell (1810-81) also agreed with many of the Society's proposals, notably the idea that a relative signing the order for an admission should have seen the patient within the recent past. (PP, 1859, Sess 2, VII, p. 62).

⁶⁸ They included Wakley; George Alfred Walker, a notable writer and campaigner on the Metropolitan Burials issue; Robert Barnes, an authority on the diseases of women and children, and translator of Baillarger's *Lectures on mental diseases*; Henry Walker, who petitioned Parliament in 1845 about the lunacy bills; Thomas Dickson, Superintendent of Manchester Royal Lunatic Hospital, Cheadle, Cheshire, and author of *Observations on the importance of establishing public hospitals for the insane of the middle classes*, 1852; John Parkin, see footnote 44 above. Also used by the Society were Dr Wm. Buchanan MD (retired) of Cheshunt, Herts, and a Dr Pearce.

(I) PARLIAMENT AND GOVERNMENT

I do not despair of opening Mr George Lewis's [Home Secretary] mind to the justice and commonsense reasonableness of some of my views—more particularly if, as in Lord Shaftesbury's conduct with regard to the private lunatic system, I show the inconsistency between his opinions and projects. (J. T. Perceval⁶⁹)

From 1845 to 1863, Parliament and governments were bombarded with literature by the ALFS.⁷⁰ Most was directed at the Home Secretary, who, it was hoped, would use the information as a means of putting pressure upon the Lunacy Commission. In 1859, Perceval remarked, "what has compelled me always to load Honorable Secretaries of State with long letters? It is because . . . if I write to the Commissioners, I have no security that I shall have an upright decision."⁷¹ Inevitably, prolonged exposure to the Society's beliefs proved effective, and gradually, many of its ideas were plagiarized by the Board. True to a meanness of spirit the Commissioners often displayed, and an impoverished sense of their own security, they were afraid to acknowledge the origin of these contributions, and tacitly accepted credit for them. This is amply illustrated by the 1845 Care and Treatment of Lunatics Act. The ALFS strenuously opposed this measure through its MPs Wakley, Duncombe, and Crawford. In particular, it objected to another Commission which would invest increased power in a central authority at the expense of local jurisdictions.⁷² Duncombe maintained the new Board would not be sufficiently impartial to give patients a fair hearing, and referred to it as a body, "hateful and foreign to the Constitution",⁷³ adding that he would divide the Commons at every opportunity.

Shaftesbury feared Duncombe's ability to do so, and angrily believed that Duncombe had given the subject little thought. His own carefully prepared case does not seem to have had much appeal either. On 22 July, he wrote, "very few aided me—*none* of the pious party of the House. I have received from them nothing but empty commendation. Strange that such a man as Mr Duncombe *omni corruptus vitio* should so triumph." The following day, he capitulated to ensure the safety of his measures, and made a private accommodation with Duncombe.⁷⁴ The importance of the clauses Duncombe then obtained for the Society has never been fully appreciated, nor have their origins been acknowledged.⁷⁵ They include some of the most important safeguards for patients in the new legislation. Amongst them are clauses insisting that

⁶⁹ PRO/HO45/OS/7102 Perceval to Clive 55 April 1861.

⁷⁰ The Society submitted petitions in 1846, 1847, 1848, 1849, and 1852.

⁷¹ PP, 1859, Sess 2, VII, p. 46.

⁷² Duncombe and Crawford also opposed retiring pensions for Commissioners and suggested a reduction in their proposed salaries. The language used by these men and other members of the ALFS reflects many of the preoccupations of Joshua Toulmin Smith (1816–69), the lawyer, phrenologist, and localist champion. See *Government by commission, illegal and pernicious: the nature and effects of all commissions of inquiry . . . and the importance of local self-government*, London, Sweet. 1849.

⁷³ Hansard, HC, 3S, LXXXII, 16 July 1845, pp. 14–15. Also, JHC, vol. C, 2, 15, and 16 July 1845 for split votes.

⁷⁴ Shaftesbury diaries, loc. cit., note 34 above, SHA/PD/4, 5, 22, and 23 July 1845.

⁷⁵ Francis Offley Martin, the Charity Commissioner, made some acknowledgment, *An account of Bethlem Hospital: abridged from the report of the late Charity Commissioners*, London, William Pickering, 1853. The book was dedicated to Duncombe for his opposition to the exemption of Bethlem from the 1845 Act, and Martin sought to obtain the continuing support of the radical Metropolitan MPs to secure further reforms.

licensees of private asylums should reside on the premises, and that doctors should state the facts concerning patients' illnesses on their certificates. Duncombe was unable to obtain a coroner's inquest on all persons dying in asylums,⁷⁶ as occurred in gaols, but did secure a stipulation that medical attendants should report all deaths to the local Registrar within forty-eight hours. Other major rights were also procured. In future, abused or neglected patients could get a copy of their orders and certificates, and the Home Secretary could direct the prosecution of those illegally confining or maltreating patients.⁷⁷

The very need for the Society to promote these clauses suggests that the legislation of 1845 was rushed and inadequate. Shaftesbury also rejected several good proposals that the Commission later legislated for, and others that could usefully have been included.⁷⁸ The Society's contribution illustrates that it had already considered the need to legislate for an improved quality of asylum owner, and, in time, it became concerned with all aspects of patient care. Draft bills were presented to Parliament in 1847, 1848, 1851, and 1853 by its MPs, and all were carefully studied by the Home Office before being forwarded to the Commission. These bills were a curious mixture of outlandish and sound proposals, a few of which were adopted. In 1853, for instance, it was mooted that bishops should be entitled to attend board meetings of the Commissioners or Visiting Justices and vote as ex-officio members. Clearly, this could never have been endorsed, constituting as it did, a serious abrogation of official powers.⁷⁹ It was this kind of ludicrous suggestion that fed the Society's opponents with ammunition, and distracted attention from more practical ideas.

The ALFS also made a number of valuable recommendations in 1853, when new legislation was being prepared. It wanted clauses in the act relating to patients' legal rights displayed in the wards of every asylum, and proposed that routine medical reports record whether inmates denied the propriety of their detention. Other useful ideas included the following: that patients' property should have a seal placed on it the moment they were confined, only to be removed in their presence or an attorney's; that licences should only be granted to proprietors of integrity or celebrity in treatment of the insane, or those pioneering new advances; and that asylums where patients could reside voluntarily should be established as half-way houses between admission and discharge.⁸⁰ Once again, only a few of the Society's ideas were adopted. It obtained an improvement in medical certificates, and also a clause that in cases of death, the registrar should report to the coroner when there was reasonable cause for suspicion.⁸¹

⁷⁶ This was always a major objective of the Society. It had, in fact, been proposed in 1828, but was struck out of Gordon and Ashley's bill by the Lords.

⁷⁷ 8 and 9 Vict c100, ss 24, 45, 46, 48, 55, 56, 106, and 105. In view of the mental fragility of patients on discharge, his clause extending the time limits within which they could bring cases of illegal confinement to court was particularly useful.

⁷⁸ The protection of patients' property automatically once admitted, the establishment of half-way houses with voluntary confinement, written justification for a detention by the signer of an order of admission, and increased visitation. Perceval (1846), op. cit., note 35 above, letters V, VI, and VIII.

⁷⁹ J. T. Perceval, *Hints for the abolition of private lunatic asylums and for a reform of the laws respecting the seizure and confinement of persons alleged to be of unsound mind*, London, 1853, p. 4. (Found in PRO 11045 OS.7102.)

⁸⁰ *Ibid.*, pp. 1-4.

⁸¹ 16 and 17 Vict c96, ss 10 and 19.

These gains seem meagre reward for the Society's campaign, but it had sown the seeds for a number of other changes by its preoccupation with the admission process and the rights of patients once incarcerated.⁸² Its continuing persistence was finally rewarded in 1859, when an ally, Mr Tite⁸³ presented a petition to Parliament, which led to a Select Committee on Lunatics. Some historians have depicted this as the Society's greatest achievement, but the latter perceived it as a major disappointment.⁸⁴ Taking advantage of a wave of hostility towards the lunacy laws aroused by three court cases, the Society had hoped to force the Home Secretary, S. H. Walpole,⁸⁵ into wide-reaching changes. In 1862, Saumarez wrote to Walpole's successor, Sir George Grey, "you are perhaps not aware that the Hon. S. H. Walpole introduced the Bill of 1852-3 and was naturally jealous of its frightful working being exposed—and for this same reason he packed the 1859 Committee and was elected Chairman instead of Mr Tite who moved for the appointment of the Committee. As Chairman he prevented such evidence being adduced as would have exposed the abuses."⁸⁶ Key witnesses Perceval wished to introduce were never called, most important of whom was Dr Coxe, the Scottish Lunacy Commissioner who supported the Society in advocating the Gheel system of boarding out voluntary patients. This was in direct opposition to Shaftesbury's English Board.⁸⁷

Nevertheless, Walpole's Bills and the Select Committee's Report reflect the extent to which the Society's ideas had influenced government thinking. Walpole's Care and Treatment Bill, whilst avoiding the main issue behind the ALFS's campaign, a judicial hearing for every patient before admission, did propose, as Perceval had suggested, that all those detained should be visited within seven days and an independent report sent to the Commission.⁸⁸ The Society was, in fact, wrong to blame Walpole's obstructionism for its lack of success in 1859, as he voted for many of its proposals when the Select Committee's Report was prepared. Rather, this Report fell by the wayside through the demise of the Tory government. When the Committee was considering Bolden's scheme to have a magistrate examine all certificates (as opposed to all patients) before admission, Walpole cast a deciding vote in favour, in direct opposition to Colonel Clifford (Tory MP and Lay Lunacy Commissioner) and Sir

⁸² The Society also obtained several clauses in the Scottish Lunacy Act 20 and 21 Vict c71 (1857) through its contacts with the Lord Advocate, notably the suggestion that clergy should visit local asylums on a regular basis. Also the enactment that before an admission, the relatives should sign a statement about the case, which, together with two certificates, would go to the local sheriff, to make an order. (It is interesting to note that in 1983, MIND was opposed to relatives being allowed to sign for the confinement of patients.) The above measure also permitted the voluntary confinement of nervous patients for up to six months.

⁸³ Sir William Tite 1798-1873. Architect; MP Bath 1855-73; FRS 1835. (See *DNB*.)

⁸⁴ As achievement: Hunter and Macalpine, *op. cit.*, note 35 above. As failure: PRO/H045/OS/7269, Saumarez to Sir George Grey, 16 May 1862.

⁸⁵ Spencer Walpole married Perceval's sister Isabella.

⁸⁶ PRO/H045/OS/7269.

⁸⁷ For information on the Gheel system, see John Webster, 'Notes on Belgian lunatic asylums, including the insane colony of Gheel', *J. psychol. Med. ment. Path.*, 1857, 10: 50-78 and 209-247; Henry Stevens, 'Insane Colony of Gheel', *J. ment. Sci.*, 1858, 4: 426-437; W. L. Parry-Jones, 'The model of the Gheel lunatic colony and its influence on the nineteenth-century asylum system in Britain', in Scull (editor), *op. cit.*, note 6 above, ch. 8.

⁸⁸ PP 1859, Sess. I, II, p. 117, ss 13 and 20. Known as the Examiners Bill. It took up the Society's idea that within three months, a patient's detention should be reviewed (s 14).

George Grey.⁸⁹ That the ALFS failed to appreciate his contribution reflects not only the limited extent to which it was consulted, but also its ability to alienate even potential allies.

This rebuff in 1859 heralded a tapering down of the Society's work, but the influence of its ideas continued. Shaftesbury fought a strenuous rearguard action against the rising tide of belief that all should be afforded a jury trial or magisterial hearing before admission, but this was finally enacted in 1890, four years after his death.⁹⁰ Similarly, the voluntary admission of some patients, free passage of mail, employment of both sexes together on the nursing staff, and the licensing of nurses all came later. Unfortunately, they were adopted in a piecemeal fashion, rather than in a programme as the Society had intended, making it difficult to attribute any direct influence. It has also meant that the Society has been prominent only for its interest in certification. Its use of MPs and government went beyond merely obtaining legislative enactments, however, to a more educative role.

Wakley, for instance, used his position as a coroner to impart the ALFS's views. In 1848, during one inquest, before a gallery packed with Society members and the press, he publicly criticized two Commissioners on defects in the Lunacy laws, utilizing the Society's arguments.⁹¹ He also assisted with the advocacy of individual cases, helping obtain the return of one patient from confinement in Ireland and acting as a medical witness at his court hearing. In 1847, he led a vigorous parliamentary attack on the Commission over its handling of a scandal at Haydock Lodge Asylum.⁹² But his involvement was a mixed blessing. He parted company with other Society members where supremacy of medical men in this field was at stake, wishing to legitimate their influence whenever possible. In 1847, when Duncombe supported one of Perceval's Bills, Wakley sided with the Commission's representatives in the Commons, ridiculing its contents. The Bill aimed to afford the Church a greater role in the care of patients, to which Wakley's acerbic wit immediately found answer in the *Lancet*: "Lunacy", he wrote, "is already transferred from the profession of medicine, and handed over to the lawyers, to an extent which is highly prejudicial to the . . . honour of medicine. The idea of giving the Bishops a finger in the pie could scarcely have originated in any other than the brain of a lunatic." Evidently, Wakley's support was bought at some cost to Society members with personal experience of mental illness.⁹³

Other MPs also lent support in canvassing Parliament, asking for Returns,⁹⁴ and

⁸⁹ Grey had a proprietary interest in the Commission after nine years advising it. He had also served as a Metropolitan Lunacy Commissioner 1833-4.

⁹⁰ The ALFS wanted compulsory detention under certificates to be complemented by the possibility of informal admission. In 1861, Dr Nesbitt, Superintendent of Northampton Hospital, wrote to Perceval criticizing the law, which ignored a person's will in the issue of confinement, enclosing a pamphlet addressed to Shaftesbury. (PRO/H045/0S/7102). It is true that the Acts 16 and 17 Vict c96, s6, and 25 and 26 Vict cII, s18 did allow some ex-patients to be received as boarders in private asylums, but this was a very limited provision; cf. Stanley Haynes, 'Voluntary patients in asylums', paper read at the Quarterly Meeting of the Medico-Psychological Association, 28 October 1869. (V & A, Forster MSS, F 37 P 23, 559, No 9.)

⁹¹ *Morning Post*, 24 February 1848.

⁹² *The Times*, 28 August 1864; *Morning Post*, 27 August 1864; *Morning Chronicle*, 27 August 1846.

⁹³ *Lancet*, 1847, ii: 56.

⁹⁴ The only Returns asked for between 1845 and 1860 emanated from the Society. They were initiated by James Wyld in 1848, Henry Drummond in 1853, and William Tite in 1856 and 1858.

personally aiding patients,⁹⁵ but the Home Office was the Society's major ally throughout this period. At the ALFS's insistence, it obliged the Commission to institute several changes. In 1850, for example, the Board omitted its customary list of asylum owners from its Annual Report, which elicited an immediate complaint to Sir George Grey, who got it restored. Keeping the Commission up to the mark was not enough though, and the Society had frequent recourse to the courts in individual cases, when its help was invoked.

(II) USE OF THE LEGAL SYSTEM

In no other country than England, where private individuals perform so many of the local duties of government, would such a Society have even been imagined . . . perhaps not one case in fifty will be brought to light by its exertions. But even the injustice of the remaining forty nine will be modified by its influence. (*The Atlas*, 28 April 1847.)

From the outset, the ALFS had a strong legalistic bias, although it was never overly litigious. Its funds could not support the cost of regular court actions, and, as Perceval remarked in 1859, it had never "pretended that cases of unjust confinement were general, as compared with the number of persons confined as insane . . . the lunatic asylum keepers would be spoiling their game if this were so."⁹⁶ In fact, the Society was conspicuous by its absence from the most celebrated cases of dubious confinement in the mid-nineteenth century, most of which involved Chancery patients. Many of the actions it brought sought to highlight other infringements of patients' rights, within the context of legitimate admissions. In 1849, for instance, two men were sentenced to six months' hard labour for defrauding a Bethlem patient of his savings.⁹⁷ Nevertheless, the Society did come across many patients who were unnecessarily, if not illegally detained. In the face of obstruction from asylum owners, it generally resorted to the use of *habeas corpus* to bring these cases before the courts. However, its contact was often with discharged patients who wished to seek redress for their sufferings in asylums. These cases were not generally successful in obtaining compensation, but they did occasion proprietors acute embarrassment, especially if their asylums were criticized.⁹⁸

It was the cases of illegal confinement that attracted most attention, however, despite evidence from several noted hearings that patients found sane and discharged were in fact quite disturbed. The well-publicized cases of Ruck, Leech, and Turner in 1858 and illustrate different aspects of this. Mrs Turner, who was detained at Acomb House, York, escaped and was recaptured in circumstances of considerable brutality. Her surgeon, Mr Metcalfe, admitted acting in a grossly improper manner and yet even

⁹⁵ Lord Dudley Stuart is a good example. He had a personal interest in the subject, having a son who was a patient of Drs A. Morison and E. J. Seymour. Stuart looked after his own son in private lodgings. (RCPE, Morison diaries, 16 and 17 May 1849). In 1848, he canvassed the Lord Advocate concerning the Scottish Lunacy Acts (Morison diaries, 18 May 1848). In 1853, he was instrumental in obtaining an inquiry into abuses at Colney Hatch, primed by the Society (HC Accounts and Papers 1852-3 (44) Vol C, pp. 45-50); and in 1854, he brought up the case of the Rev. Edmund Holmes at Heigham Retreat (PRO/H045/0S/5521).

⁹⁶ PP 1859, Sess 2, VIII, p.15.

⁹⁷ *The Times*, 18 June 1848, p. 7. The case of Manuel Pimental, heard in the Central Criminal Court.

⁹⁸ *Ibid.*, 17 February 1852, p. 7, and 18 February 1852, p. 8. James Hill brought an action against Francis Philp, proprietor of Kensington House, for illegal confinement. Hill was clearly disturbed, and the jury found for Philp, but it also impressed on him that he should be taking a great deal more care in the management of his asylum.

Procter, a Lunacy Commissioner, expressed sympathy for him in having such an impossible woman to deal with.⁹⁹ Leech was also a known eccentric, who was confined only after he decided to marry his servant, and relatives feared he might dissipate his inheritance. The public, though, questioned their motives.¹⁰⁰ In Ruck's cases, it was agreed he was an alcoholic, but the controversy centred on the fact that John Conolly had issued his certificates of Ruck's lunacy after a joint medical examination, a clear violation of the law; and, more seriously, had received a free from Moorcroft House, where he was consulting physician, for referring Ruck to them.¹⁰¹ These and other cases in Chancery are interesting because they reflect, not only the shortcomings of medical testimony, but also the point at which various groups were prepared to define behaviour as insane.¹⁰²

The only well-known cases the ALFS did show an interest in was that Louisa Nottidge, an heiress placed in an asylum to prevent her from giving her inheritance to a religious sect. Chief Baron Sir Frederick Pollock created a considerable stir in the psychiatric community with his concluding remarks in the case, when he stated the conviction that no person should be confined on the grounds of mental illness unless they were a danger to themselves or others.¹⁰³ This elicited the Society's interest, as they hoped it would end the wholesale incarceration of harmless chronic patients, including epileptics and idiots, which had been occurring for some years.¹⁰⁴ In practice, much of their work was concerned with these defenceless groups, who were unable to obtain help for themselves.

Between 1845 and 1863, the Society took up the cases of at least seventy patients.¹⁰⁵ Fundamental to its philosophy was the concept that patients should be allowed access to legal representation, and even encouraged to seek it. Like many localists, they were suspicious of the quasi-judicial powers afforded central Boards, such as the Lunacy Commission, to hold private inquiries and examine witnesses on oath. In theory, the Commission claimed that these were invariably held to decide on the merits of proceeding further to the courts, but in practice, they were conducted within a legalistic framework, whilst riding roughshod over the rules of evidence and prejudicing some patients' cases before they received a proper hearing. The Society complained that there was no representation for patients at these hearings, and no appeal from them, except to the Home Secretary, who would refer the matter back to the Commission.¹⁰⁶

⁹⁹ V & A Forster MSS, 48 F 65, Procter to Forster, letter dated 29 August 1857.

¹⁰⁰ For details see, J. L. and B. Hammond, op. cit., note 6 above, p. 205.

¹⁰¹ See A. Scull, 'John Conolly: a Victorian psychiatric career', in Bynum and Porter (editors), op. cit., note 38 above, vol. 1, p. 45.

¹⁰² In *An address on the laws of lunacy*, 1854, p. 9, Saumarez attacked the way doctors generally denied that lunatics were responsible for their actions in court, and yet were prepared to punish them for minor misdemeanours in the asylum.

¹⁰³ PP 1849 XLVI, p. 381. Copy of the letter to the Lord Chancellor from the Commissioners in Lunacy concerning their duties and practice under the Act 8 and 9 Vict c 100; Also J. Conolly, *A remonstrance with the Lord Chief Baron touching the case Nottidge versus Ripley*, London, Churchill, 1849.

¹⁰⁴ The County Asylum Act of 1845 actually encouraged the incarceration of these groups. See Perceval's remarks in his edition of A. L. Pearce, *Poems by a prisoner*, London, Effingham Wilson, 1851, introduction.

¹⁰⁵ This figure is based solely on cases recorded in the Lunacy Commission's minutes. There were clearly others, as evidenced by the cases of Pimental and Beare, which were not mentioned by the Commission.

The Alleged Lunatics' Friend Society

Often, asylum owners would make it difficult for patients to obtain legal advice, and the ALFS invariably had to approach the Commission when requested to act as counsel, because access to patients at their asylum had already been refused. In the face of these barriers, the society resolved that, wherever necessary, it would pursue cases into court, especially when particular points of law were concerned.

Unfortunately, in attempting to overcome the obstructionist tactics of the Commission, the Society sometimes exceeded its brief, giving opponents further opportunities to depict it as an irresponsible and harmful influence. In 1848, the ALFS was informed that a Mr Dixon was being wrongfully held at Northwoods Asylum. Bolden came to the Board to ask for copies of Dixon's certificates, one of which had been obtained after his admission. In the meantime, Dr Fox had discharged Dixon as "relieved", and almost immediately he was readmitted on correctly completed certificates. Dixon subsequently wrote to the Board to say that Bolden was acting without his sanction,¹⁰⁷ although by this time Bolden had already applied for a writ of *habeas corpus* which then came to court. Although Dixon was found insane, the Society's attempt to cast doubt on the validity of his certificates, because both doctors had omitted the words "duly authorised to practise" after their names, brought this issue to public attention. Baron Alderson would not concede that the certificates were thus invalidated, but following this case, the Commission promoted legislation to ensure that medical qualifications were noted on certificates. Similarly, in 1848, Pulverstoft, a patient at Northampton Asylum, complained that the Society had approached the Lord Chancellor and Home Secretary against his wishes.¹⁰⁸ Clearly, there is some disparity here between belief in self-expression and autonomy for patients and such a blatant invasion of their rights, which can only be explained by an overweening desire to expose practices at these two asylums. Nevertheless, this sort of tactic cast doubt on the Society's veracity and methods, and cost it much support.

In general, however, the ALFS's recourse to the judiciary met with a favourable response. a barometer of its success is provided by the Anstie brothers' case. These two subnormal men had been placed at Fishponds Asylum by their father. After his death, greedy relatives reduced the amount being provided for their care from a trust fund, necessitating their removal to the pauper section of the asylum. Gilbert Bolden applied to the Court of Chancery for a writ *de lunatico inquirendo*, placing the boys under the Court's care, to which the relatives responded with a counter-petition asking for the family to be appointed as their protectors. In general, courts were opposed to interfering in family affairs, but in this instance, the judge praised the Society's

¹⁰⁶ For a more detailed instance of this type of criticism, see the complaints made by Bethlem's governors about the Commission's inquiry there in 1852. Bethlem Hospital, *The observations of the Governors upon the report of the Commissioners in Lunacy to the Secretary of State on Bethlem Hospital*. London, David Balten, 1852.

¹⁰⁷ The initial referral came from a couple with whom Dixon had lodged for several years, saying he was not a proper person to be confined. (MH50/3, 5 July 1848.) At the time, the Lunacy Commission informed the Home Office that Fox had made an irregularity from a misapprehension of the law. (MH50/3 27 July 1848). However, during the inquiry into neighbouring Fishponds Asylum in 1848, more than fifty incorrect certificates were found at this asylum. *The evidence taken on the inquiry into the management of the Fishponds Private Lunatic Asylum*. Bristol, Joseph Leech, 1848, found in PRO/HO45/OS/2797.

¹⁰⁸ MH50/3, 19 May, 5, 13, 20, and 27 July, 3, 9, and 16 August.

concerned attitude and upheld its case, nominating Bolden to protect the brothers' financial interest.¹⁰⁹ The sympathy of the legal profession is seen in several other spheres as well, notably in the Lord Chancellor's support for its appeals to the Lunacy Commission to release certain documentation. Caption Childe's case provides a good illustration. Childe was first confined as a single patient in May 1841, because of his delusion that Queen Victoria was in love with him. He was placed in a cottage near Regent's Park under Dr E. T. Monro's care and was subsequently moved to lodgings in Leamington Spa. In August, he was discharged from these after he appeared to have renounced his beliefs, but the following year, when stationed in Ireland, began to make threats against his senior officer, Lord Raglan, and was therefore consigned to Farnham House, Dublin. Ten years later, Wakley and Bernal Osborne (MP for Dover) had him returned to England at the Society's instigation, and placed at Hayes Park Asylum, near London, much against his father's wishes. Initially, Bolden made a considerable error of judgement in assessing that Childe was sane and competent to manage his affairs.¹¹⁰ Subsequently, however, he argued that Childe should either be discharged or his long-term detention formalized by a *Commission de lunatico*, which would provide some protection of his rights. Childe's family wanted to continue an indefinite detention with the minimum off publicity.¹¹¹ Throughout the case, the Lunacy Commission acquiesced in William Conolly's opposition to the Society's interference, and correspondence to and from Childe was withheld by Conolly on several occasions, prompting Wakley to threaten a parliamentary inquiry. More importantly, the Lord Chancellor's aid was successfully invoked on three occasions, to obtain access for legal representatives, second medical opinions, and the copying of documentation.¹¹² The Society was not always so fortunate, and was routinely refused access to information on technical grounds.

The legal profession also lent the Society considerable support in its wider aims. With ten lawyers amongst its complement, it was well equipped,¹¹³ notably in the Court of Chancery. C. P. Villiers, the Free Trader, had been an examiner of witness there from 1833 to 1852,¹¹⁴ and the Society's QC, James Russell, was also an expert in the same court.¹¹⁵ Russell primarily wanted to reform Chancery, and to that end had

¹⁰⁹ For discussion of the case see PRO/HO45/OS/2797.

¹¹⁰ See PRO/HO45/OS/5490. Before applying to Chancery, Bolden tried to get Childe released because he was "illegally" confined on Irish certificates.

¹¹¹ Childe's father had made an agreement with Sir George Grey that his son would only be moved from Ireland after consultation between himself and the incumbent Home Secretary. There were several features about this case which disturbed the ALFS, particularly the fact that in May 1841, Childe was seen in the Home Secretary's office by Sir J. Graham, Mr Hall (principal magistrate at Bow Street), and four doctors, who agreed on his confinement. He was unrepresented at this meeting, and remained so thereafter. PRO/HO45/OS/2726.

¹¹² MH50/7, 11 May 1854, 9 and 15 June 1854.

¹¹³ George Hansard was an equity draftsman and conveyancer, as was Regnier Winkley Moore. Another useful member was Henry Francis Richardson, who was solicitor to a number of other societies, and let out premises cheaply to the Society.

¹¹⁴ Charles Pelham Villiers 1802–98. Barrister. Contemporary at Lincoln's Inn of the Lunacy Commissioners Lutwidge and Mylne. MP Wolverhampton 1835–85. (See *DNB*.)

¹¹⁵ James Russell 1790–1861. Barrister with large practice in Chancery. To the probable embarrassment of the Commission, he had been a close colleague of Mylne's, co-editing several books on Chancery with him. (See *DNB*.)

joined the Society for Promoting the Amendment of the Law.¹¹⁶ It was through the auspices of Russell and Saumarez that the Law Amendment Society was approached in 1848. It was headed by former Lord Chancellors Brougham and Lyndhurst, both of whom had been heavily involved in previous lunacy legislation. They directed their Committee on Equity to examine the lunacy laws, and its subsequent report adopted a large number of the ALFS's proposals.¹¹⁷ In December the same year, Perceval wrote to Sir George Grey, enclosing a printed letter he had forwarded to Brougham as Chairman of the LAS. He hoped Grey would adopt some of his ideas in forthcoming legislation. Perceval quoted letters from F. B. Winslow and J. Conolly to the *Morning Chronicle* and *Daily News* respectively, which attacked the conclusions of the Equity Committee. Winslow disliked the suspicion cast on asylum proprietors, and claimed that it would be impractical for a jury to decide on the necessity of each admission, as laymen would be unable to distinguish the fine shades between disturbed and deranged intellects. Perceval, though, felt it indelicate that gentlemen who profited from patients' detentions should be the sole arbiters of these supposed fine shades. He also poured scorn on Winslow's references to *habeas corpus* as a safeguard, pointing out that patients were often refused access to an attorney, or their friends left unaware of their confinement.¹¹⁸

The interest taken in this issue by the LAS was a major coup for the ALFS, as the former included eminent lawyers amongst its membership, some of whom were in a position to affect the formulation of legislation, and others its implementation. The Equity Committee also concerned itself with asylum conditions and the property of lunatics. It made reference indirectly to the Society's work in Gloucester,¹¹⁹ and was firmly in favour of a "judicial" person visiting every patient soon after admission. Other recommendations that reflect Perceval's influence were more frequent visits by the clergy, a coroner's inquest on all asylum deaths, an enforced condition of residence on proprietors, and greater attention to the plight of single patients.¹²⁰ These suggestions added to the increasing pressure on Shaftesbury to revise the lunacy laws, and were supplemented by support for the ALFS's campaign to reform lunacy proceedings in Chancery.¹²¹ Chancery had been responsible for the care of some lunatics and idiots since the middle ages. The king's authority had been vested in several courts,¹²² but the property of lunatics had constantly been embezzled and frittered away. Blackstone denied that the law was abused, but there undoubtedly was some basis for the reputation that Chancery had acquired.¹²³ A system had evolved

¹¹⁶ Hereinafter referred to as the Law Amendment Society (LAS). Henry Drummond was also a member.

¹¹⁷ *Report of the Committee on Equity on the Law Respecting Lunacy*, London, 1848.

¹¹⁸ PRO/HO44/52 Perceval to Sir George Grey, 21 December 1848.

¹¹⁹ *Report of the Committee on Equity*, pp. 15–16.

¹²⁰ Also mentioned were: a register of keepers, a greater strictness in granting licences, and the reduction of costs in Chancery proceedings.

¹²¹ William Carpenter 1797–1874. Writer and editor. Carpenter was appointed Hon. Sec. of the Chancery Reform Association 1851–3. (See DNB.)

¹²² 'An Act Touching Idiots and Lunatiques', promulgated on 13 October 1653, for instance, stated, "the persons of idiots and lunatiques have received much damage, and their estates been much wasted and spoiled, since the four and twentieth day of February, One thousand six hundred and forty five (on which date the Court of Wards and Liveries, which had the care and protection of such persons was voted down) occasioned by the not settling of a way since the dissolution of the said court, for passing the Bills."

whereby interested parties petitioned the Lord Chancellor to inquire into the condition of an alleged lunatic. If there was a case to answer, he would a writ *de lunatico inquirendo* to the sheriff of the patient's county and the case would be tried before a jury. If the inquisition stood, his person and property were assigned to the care of Committees of the Person and the Estate. Often, these committees were vested in one person.¹²⁴ This was an expensive process, and most commissions were put in suit concerning chronic patients, who were entitled to large estates. There was provision, by supersedeas, to reverse this process, but it was rarely invoked because of the long-term illness of the patients involved.

The campaign against Chancery was led by Saumarez, who had bitter personal experience of this court. His brothers Paul and Frederick had been placed under it by their father, but Richard was denied access to them refused permission to arrange second opinions from an independent doctor, and not kept informed when they were moved.¹²⁵ Together with Bolden, Saumarez made repeated attacks on the endless expense of Chancery proceedings, which involved applications to the Masters in Lunacy, numerous affidavits and depositions, and fees for the preparation of all documents.¹²⁶ They also criticized the fact that membership of Committees of the Person and Estate were bought and sold as investments, and the scandal that these bodies were not held accountable for their financial dealings.¹²⁷ Former Lord Chancellors Lyndhurst and St Leonards supported this campaign, as did Brougham, who had long believed that visitation of Chancery patients by the Lord Chancellor's Medical Visitors was inadequate.¹²⁸ Saumarez went so far as to allege that the Chancellor's Secretary of Lunatics actually falsified the Medical Visitors' reports,¹²⁹ and argued strongly for an amalgamation of this Board of Visitors with the Lunacy Commission. Both administrations strenuously opposed such a move, although it might well have ensured some basic protection for Chancery patients within the minimum standards of care set up by the latter. The ALFS clearly believed that the Lunacy Commission could mitigate the worst practices of Chancery, but Shaftesbury knew that he would never get the willing co-operation of Chancery in such a joint enterprise. Despite its failure to obtain this unified service, the Society ensured a lengthy debate on the subject in 1859, and undoubtedly influenced subsequent changes in 1862, including increased visitation by the Medical Visitors, reduction in the expense

¹²³ Dickens described it as having "its decaying houses and its blighted lands in every shire, its worn out lunatic in every madhouse, and its dead in every churchyard." His lampooning of the proliferation of complex administrative procedures was entirely accurate. Charles Dickens, *Bleak House*, ch. 1.

¹²⁴ These committees had to pay a bond, calculated on the estate, as a recognisance of good behaviour. Analysis of these suggests that many estates were gradually reduced in value. (PRO/J/103/1, 2, and 3.)

¹²⁵ Saumarez, op. cit., note 43 above. p. 14.

¹²⁶ PP 1852-3, XXV, 547. These returns on Chancery fees give some idea how costly proceedings could be. Saumarez spent over £600 on his brothers' case, including: £25 for an appointment of new committee, £17 for varying the maintenance, £11 for preparing leases, and £17 for grants of custody.

¹²⁷ Brougham tried to make them accountable in 1833. See PRO/LCO/11/1—last document in the file, dated 22 August 1833; See also, PP 1859, Sess. I, III, pp. 256-269. In one case, Drax vs Grosvenor, the Lord Chancellor ordered that an account be produced, and he was overturned by the House of Lords.

¹²⁸ See, PRO/LCO/II/I Lord Brougham's letter dated 22 August 1833.

¹²⁹ PP 1859, Sess. 2, VII, p. 4.

of application for a Commission, more accountability for Committees, and a clarification of the respective jurisdiction of the two bodies.¹³⁰

The importance of these achievements and the Society's other work in the courts was that it continually posed questions about the adequacy of long-term care, whether in asylums, workhouses, or private lodgings. It was also the only group prepared to bring test cases to court in this area of civil liberties. Most Victorians preferred to keep the subject out of the public eye. Opposition to the ALFS's desire for a court hearing prior to admission sprang from motives other than social delicacy, however. The Society had researched legal systems widely, pointing out that in France, Belgium and Prussia¹³¹ patients were only confined after a judicial inquiry. Shaftesbury remained opposed to borrowing any scheme connected with the continental autocracies. Of the French *conseil de famille*, whereby a patient's family met the local magistrates to discuss certification and admission, he said in 1859, "if you read accounts of the system . . . in France you would think that nothing could be more perfect . . . I think it is very doubtful if it is so."¹³² There is little evidence, however, that he ever examined the practicality of foreign systems closely. Rather, he subscribed strongly to the prevailing belief that early admission was of vital importance to future cure, and felt a court hearing was inimical to this. Shaftesbury also refused to consider Perceval's suggestion that many patients could be admitted voluntarily, by-passing this difficulty. In thus appealing to a court hearing, the ALFS placed great faith in the local magistracy, and juries.

(III) THE LOCAL MAGISTRACY

In the provinces, the local Quarter Sessions were responsible for appointing visitors to both public and private asylums, and it was to these visitors that the Society turned for help. This might appear surprising in view of Perceval's earlier comments about magisterial sloth and ignorance, and the ALFS certainly received a mixed response to its overtures. Perceval's faith in local justice was mainly based on the jury system, but he acknowledged that he had to work with the magistracy. Where inspection was concerned, he would have preferred to see local clergy doing the bulk of the visiting, believing that they would not come in as officials "representing the locks and keys which separate the patients from society, but come in as part of the neighbourhood, and repeat a little of the gossip of the day, and it would seem to supply a connexion with society."¹³³ The idea of more "open" institutions was one the Society always pursued, and it saw regular admission of the clergy and public as a real safeguard against abuses. Given the existing structure, however, the Society worked hard to promote more enlightened attitudes amongst local officials.

Whenever possible, members of the Society used their local connexions to exert influence,¹³⁴ and they had definite strongholds in various areas of the country,

¹³⁰ 25 and 26 Vict c III, The Lunatics Law Amendment Act. For further material on the arguments concerning amalgamation of the two, see PRO/LCO/1/64-67.

¹³¹ Perceval was a personal friend of the Editor of *Elberfelder Zeitung*, who sent him debates in the Prussian Chambers on Lunacy, and whom he had visited. In 1850, the Society lobbied the US Ambassador, Mr Lawrence, seeking information. They also promoted the system used in Jersey.

¹³² PP 1859, Sess. I, III, p. 3.

¹³³ PP 1859, Sess. II, VII, p. 44.

¹³⁴ Perceval, Saumarez, and Bailey did this through their Poor Law positions.

including Bath, Northampton, Kent, Bristol, and Suffolk. Tracing the spread of their influence is difficult, except by means of specific examples. In 1848, they provided vigorous support to the campaign of Purnell B. Purnell, a local reformer and chairman of the Gloucester Quarter Sessions.¹³⁵ Prompted by the Society, Purnell instituted a detailed inquiry into Fishponds Asylum, Bristol, previously considered amongst the leading institutions in the private sector. Many minor illegalities were discovered, coupled with palpable neglect and cruelty. Throughout 1848/49, the effects of this inquiry were exploited. Local asylum proprietors objected strongly to this outside interference, and in 1849, the owner of Longwood House, Bristol, complained that a visiting magistrate, J. A. Gordon, had brought Perceval to the asylum on a visitation, and together they had inspected and personally examined several patients.¹³⁶ The Lunacy Commission, whose primary concern was not with the good being effected, but with the establishment of a precedent that justices could introduce an outsider whilst carrying out their official duties, expressed disapproval and reported the matter to the Home Secretary. In its Annual Report the following year, the Commission afforded the Gloucester magistrates scant praise for their actions, and, of course, there was no mention of the ALFS's role in the sweeping improvements that were made. In 1850, the Society set up a testimonial to Purnell which was well subscribed, and the *Medical Times* expressed the hope that other counties would copy this example.¹³⁷

Evidence that Purnell's work, and indirectly the Society's, at Fishponds, Brislington, Ridgeway, and Longwood reached a wider audience can be found in correspondence to the Commission from a father complaining about the cruel treatment of his son at West Malling Asylum in Kent. He referred to Purnell, and listed a number of reforms he would like to see, all of which came directly from the Society's canon: a coroner's inquest on all asylum deaths; proprietors appointed by the government; more controls over private asylums; proprietors to spend more time with their patients; and a reduction in the turnover of attendants.¹³⁸ This transmission of ideas can be found in a number of counties both directly and indirectly. In Kent again, for instance, Perceval corresponded with Lord Marham, Chairman of the Quarter Sessions and a county asylum visitor. His letters were full of advice and useful criticism. He suggested a reduction of the long hours patients spent in bed, and opposed enlargement of the asylum, referring Marham to articles on the subject.¹³⁹ He also floated the idea of cottage asylums on the model of Gheel in Belgium. The ALFS had long believed that half-way houses should be built where patients could stay before the need for formal admission arose or which could act as intermediary places of refuge on discharge from asylums. It was not alone in promoting the above schemes, but it was rare to find them being advanced as a package. Although some influence can clearly be inferred from subsequent developments at Kent, direct attribution is not possible. Following

¹³⁵ Perceval had previous contacts with the Gloucester bench, having worked with the Rev. Edward Leigh Bennett, a visiting magistrate, to secure the discharge of William Bailey from Fairford House in 1842.

¹³⁶ MH50/4, 9 August 1849. See also PRO/HO34/9, 19 December 1849.

¹³⁷ *Medical Times*, 28 January 1851. For the advertisement itself, see *The Sun*, No. 17,972, 1 May 1850.

¹³⁸ MH51/44A, Letters from J. B. Player to the Commissioners dated 10 February and 11 May 1851.

¹³⁹ Kent CRO, the Marham Papers, U1515/OQ/L2, Perceval to Marham, letters dated 10 May and 19 June 1858.

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Perceval's comments, enlargement of the asylum was strenuously opposed, and some years later, a system of detached cottages in the grounds was set up for convalescent patients.

The Society tried to educate local officials in other counties, and found that many were woefully ignorant. At Pickering, Yorks, the local Poor Law guardians were unaware that they were entitled to visit their lunatic paupers in the County Asylum, and Bolden remarked in 1859, that many magistrates had not heard of the Society when it contacted them.¹⁴⁰ In many counties, the Society found it exceedingly difficult to obtain a list of the visiting magistrates,¹⁴¹ and even when the local authorities were aware of their legal obligations, both Society and Commission found that Town Councils and Poor Law guardians ignored them.

At Bath, Saumarez, from his position on the Council, carried out a long fight against the local workhouse ward for lunatics. Bath sent its acute patients to the County Asylum at Wells,¹⁴² and refused to build its own asylum, preferring to retain chronic patients and idiots in specialist workhouse wards.¹⁴³ Saumarez's concerns went much further, however, than merely ensuring that Bath observed its obligation to build an asylum for its own paupers. Many other towns and boroughs ignored this duty. He was keen to ensure a proper level of care for pauper patients in the existing workhouse facility. Saumarez complained that there was no classification of the 135 idiotic, epileptic, and insane inmates there, no resident superintendent, no control over the nurses of whom there was an inadequate number, and a deficiency in the number of dayrooms. He had a running battle with R. T. Gore, the visiting surgeon,¹⁴⁴ who denied the above allegations and was at a loss to explain Saumarez's four-year campaign to enlarge the airing grounds, in view of their "spaciousness". Despite Gore's denials, the Commission found substantial evidence of abuse and neglect. In 1859, Saumarez's complaints led to the sacking of John Cave, an attendant who had been stealing from the patients, and further correspondence in the 1860s led to effective pressure from the Commissioners for change.¹⁴⁵ Similar campaigns were carried out elsewhere, but in the face of intractable vested interests, the ALFS often had to resort to more forceful methods to publicize their work.

(IV) THE PRESS, LECTURES, AND PUBLIC MEETINGS

Like most pressure groups the ALFS made what use it could of media coverage, possessing several useful outlets. Wakley's *Lancet* regularly carried articles criticizing the practice of doctors who hired out attendants for private nursing of the insane, and

¹⁴⁰ PP 1859, Sess. I, III, pp. 230/1 and p. 216.

¹⁴¹ Ibid., p. 215. Lists of these were first published for the whole country following Mr. Tite's request in Parliament in 1858. PP 1859, XXII, 175.

¹⁴² The Commission took exception to the contract under which this was done, because it had never approved it. (Bath City Record Office, MSS on Lunacy, letters dated 27 January 1855 and 23 August 1858. See also PRO/HO45/OS/6589, letters dated 4, 12, and 19 August 1858.

¹⁴³ The latter were built in 1857 with the Poor Law Board's blessing, but without consulting the Lunacy Commission. Saumarez did, however, inform Walpole of this via Perceval. (PRO/HO45/OS/6589 Saumarez to Perceval 26 October 1858.)

¹⁴⁴ It is clear that Gore and the mayor were working together against Saumarez. Bath City Records, Lunacy MSS, letter from Gore to the mayor, 1 August 1862.

¹⁴⁵ Tite also took part in this campaign, writing to Grey. Ibid., 23 December 1862.

made use of physical coercion with patients. Often, these pieces contained some accreditation to the Society,¹⁴⁶ which also received support from other members. Peter Borthwick¹⁴⁷ was editor of the *Morning Post*, James Russell co-edited the *Annual Register*, and William Carpenter the *Sunday Times*. Others merely contributed by forwarding letters to various papers and journals, although several, like the *Medical Times*, were inconsistent in their coverage.¹⁴⁸ Generally, the issue of illegal incarceration of the sane brought a chorus of support, but other suggestions for improvements often attracted derision.

In order to counter adverse publicity, the Society also promoted its views through public meetings and lectures, which were often poorly attended. These were held to mount specific campaigns in Parliament,¹⁴⁹ but the Society also used them in conjunction with attacks on particular institutions. Their assault on Northampton Hospital is typical in this respect. An old subscription hospital, Northampton had failed to keep pace with the innovations in county asylums. The ALFS attempted to publicize the illegal admission of a patient there in 1848, and had long suspected the existence of abuses.¹⁵⁰ In July 1857, their allegations led to the sacking of three attendants, although evidence as to Dr Nesbitt's drunkenness was omitted from the Lunacy Commission's report to the Home Office. The local magistrates subsequently exonerated Nesbitt in their own inquiry. A year later, the Society obtained another inquiry, after pressure on the Home Office and Commission following a death at the asylum. Perceval produced witnesses (patients) and conducted their examination, but nothing was proved. Finally, unable to get the case reopened, Perceval resorted to a campaign in the local press and delivered a lecture "against" the hospital in Northampton Town. This had the desired effect when new staff were appointed, and a fresh treatment regime, in line with the Commission's views, was instituted.¹⁵¹

The use of public meetings and lectures appealed to Perceval's extrovert personality, and it is clear that at times the horror of his own experience and feeling of rejection was indiscriminately applied to the situations of those he was trying to help. The atmosphere at his lectures bordered on the histrionic, with ex-patients freely making serious allegations against asylums like Hanwell and Colney Hatch. Even the presence of such doctors as Conolly and Lockhart Robertson did not deter them. It was a different matter when the Society's supporters attended other meetings. William Cole, ex-patient of Fisherton House, told Perceval he had been frightened to address a

¹⁴⁶ *Lancet*, 1847, i: 82; 1848, i: 433, 678; 1852, ii: 13.

¹⁴⁷ Peter Borthwick 1804–52. MP Evesham 1835–47. Barrister 1847. Editor, *Morning Post*, 1850–52. (See *DNB*.)

¹⁴⁸ The Society could not rely on favourable coverage in the medical journals. Compare, for instance, *Med. Times*, 1848–49, 19: 68, with *ibid.*, NS. 2: 4 January 1851.

¹⁴⁹ E.g. the meeting held on 28 March 1848 at the British Coffee House to prepare a petition asking for a Select Committee. See advertisements in *The Times*, 25 and 28 March 1848; Also meeting on 1 February 1859 at Exeter Hall. See *Morning Post*, 3 February 1859; and *Br. med. J.*, 1859, i: 116–117.

¹⁵⁰ MH50/3. Entries between 19 May and 27 July 1848 for Mr Pulverstoft.

¹⁵¹ MH50/9, 8 July–31 August 1858. One of the governors tried to discredit Perceval by arguing that his history of mental illness implied that "his sympathies with the insane are of a very morbid character and his judgment to the last feeble and weak." (*Northampton Herald*, letter to the editor from George Robinson, 4 September 1858. Cf. *ibid.*, 28 August 1858 for text of Perceval's lecture. A complete account can also be found in PP 1860, LVII, 959.)

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meeting chaired by Shaftesbury in case "his expressions might be taken advantage of, in his state of poverty to shut him up again."¹⁵² There was a very real danger of this, as he had already been apprehended from outside the Commission's offices on one occasion. Perceval was undeterred, and the personal nature of many of his attacks ruined what reputation the Society might have gained for objectivity. It is not clear exactly where the boundary between Perceval's role as a private citizen and as a member of the Society lay, but in putting forward its ideas he was also venting his own frustrations with society and convention. Nevertheless, the ideas still shone through. In 1850, Perceval delivered a lecture intended to redress a loophole in the law, which failed to empower the authorities to apprehend a wandering lunatic if he was not a pauper. It took place at the King's Arms, Kensington, and centred on the case of Lieutenant Frederick Mundell, an army officer whose persecutory belief was that his promotion had deliberately been blocked.¹⁵³ Mundell spent most of his time wandering in London seeking redress from Queen Victoria, Wellington, and Lord Raglan. He was thought to be potentially dangerous, and two detectives were assigned to follow him everywhere. As a result of defects in the law, Mundell had spent three periods in prison, before a relative was finally persuaded to sign an order for his confinement in Wyke House. Perceval spared no one in his attack on the authorities, likening Richard Mayne, the Police Commissioner, to a serpent crawling all over Mundell, and calling for the police to be placed under the control of the ratepayers and not used as spies like those in France and Russia. Clearly, Perceval exaggerated the wrongs done to Mundell, and made light of his evident disturbance.¹⁵⁴ Nevertheless, his actions, which included writing to and seeking interviews with Mayne and the Home Secretary, added to pressure the police were already exerting on the Lunacy Commission and government, and contributed materially to the enactment of clauses in 1853 to rectify the law.¹⁵⁵

It is difficult to estimate exactly how extensive the ALFS's activities were, because public meetings constituted only a small part of its activities, but it certainly became identified as a repository for complaints concerning psychiatric practice from all over the country. In a number of instances, it monitored particular institutions over a period of years,¹⁵⁶ and consistently drew attention to abuses the Commission was unaware of despite its inspections. What then was the Society's importance, and how should it be assessed in the light of its relationship with the psychiatric establishment and Shaftesbury's Board?

CONCLUSION

Following the 1859 Select Committee, the Society continued to approach the Home Office and Commission for several years, but its activities came to a natural end in the

¹⁵² PRO/HO45/OS/7102 letter Perceval to Clive, 27 May 1861. See also V & A Forster Papers, 48 E 32, Procter to Forster, 11 April 1862.

¹⁵³ For detailed correspondence on this case see PRO/MEPOL/289, and MEPOL/3/20 and 21.

¹⁵⁴ Mundell carried pistols about with him, went to bed with his boots on, slept indiscriminately with prostitutes, exposed himself to his landlady, and became passionately angry when he lost his belongings.

¹⁵⁵ See PRO/HO45/OS/2222 for Police and Lunacy Commissioners' correspondence with the Home Office.

¹⁵⁶ This was true of both Hanwell and Colney Hatch, as well as Northampton Hospital. For Colney see PP, HC, Accts and Papers, 1852-3, (44), vol C, pp 45-50, and MH50/10, 1 August 1860.

mid-1860s with the deaths of key members. Bolden died in 1864, and Saumarez in 1866. In addition, Perceval had lost three brothers between 1856 and 1861, and one suspects that the appointment of his nephew Charles Spencer Perceval as the Lord Chancellor's secretary in 1866, and later as secretary of the Lunacy Commission, finally gave him some peace of mind.¹⁵⁷ Assessment of the Society's impact is not easy. I propose here to examine reactions to the Society from the medical profession and Commission, before attempting a final appreciation.

Medical practitioners certainly viewed the Society with a mixture of apprehension and admiration. In the 1850s, T. H. Tuke, owner of Manor House, Chiswick, told Perceval, after his visit to the Chartist leader Feargus O'Connor,¹⁵⁸ "I assure you I would rather see the devil in my asylum than you." This feeling was inspired by the fact that Perceval had already cost him a patient worth £300 pa,¹⁵⁹ and is representative of the trouble this Society visited on many asylums. In 1857, it complained of cruelties at Fisherton House, to which the Commission replied, on investigation, that it was satisfied with Dr Finch's unqualified denial of the alleged abuses. Given Finch's refusal to assist and the Commission's response, the Society abandoned its inquiry. A year later, however, the Commission castigated Finch for using a "ducking bath" and for generally neglecting to spend time with his patients, leaving them mostly in the hands of attendants.¹⁶⁰ Often, doctors highlighted the Society's intrusive methods, as a way of gaining the Board's support,¹⁶¹ but frequently, their motives stemmed from fear of exposure, rather than concern for the patients' welfare. The Board was often forced to act by the weight of evidence the Society produced, but it disliked having to dance to the latter's tune. Occasionally, in attempting to avoid this, the Commission missed important cues. In 1851, Mr Watson, the proprietor of Heigham Retreat, Norwich, asked the Board whether he was obliged to answer the society's inquiries about a patient, and presumably elicited the hoped-for response that it was open to his discretion. Later, substantial irregularities were uncovered at Heigham, but only thanks to Lord Dudley Stuart, who brought up the issue in Parliament for the Society.¹⁶²

Many practitioners, however, did believe that the Society served a useful purpose. Dr Nesbitt, who had less reason than most to support it after its attacks on Northampton, wrote to Perceval in 1861 about the need for an act legalizing voluntary admissions. He remarked, "I deem you to be the great pioneer to whom we are

¹⁵⁷ Dudley Montagu 1856, Spencer 1859, and Frederick James in 1861. Charles Spencer was Dudley's eldest son. The connexions of the Perceval family with the subject of lunacy seem quite endless. In 1870, Spencer's widow sold Elm Grove Asylum, Ealing, to the East India Company. It is not clear how long she had owned the asylum. (India Office Library and Records, Hailebury Records J-K, L/Mil/9.)

¹⁵⁸ PP 1859, Sess. 2, VII, p. 22.

¹⁵⁹ This patient was removed by the Commissioners following Perceval's allegations of neglect, MH50/10, 17 November 1858.

¹⁶⁰ Compare entries in the Board's Minutes, MH50/8, 11 March 1857, and MH50/9, 30 March 1858.

¹⁶¹ In April 1854, William Conolly claimed that Bolden's frequent visits and correspondence were upsetting Captain Childe, and interfering with his treatment at Hayes Park. One might ask though why the Commission allowed such an unsavoury character to practise at all? Three years earlier, they had refused to renew Conolly's licence because he had taken unwarrantable sexual liberties with a female patient. (MH50/7, 27 April 1854, and MH50/5, 17 December 1851.)

¹⁶² MH50/5, 10 April 1851. Also PRO/HO45/OS/5521. Correspondence re the Rev. Holmes. In fact, the Board was aware of previous irregularities, as a doctor was forced to leave in 1849 after getting one patient pregnant and assaulting another, MH50/3, 11 January 1849.

indebted for the initiation of various beneficial changes, I wish to ask whether you could through your parliamentary influence, obtain a glimmering into the future as sketched by me in the accompanying memorandum."¹⁶³ G. S. Ogilvie was another who sought the Society's help to promote such a scheme after being hounded by the Commission for taking uncertified voluntary boarders.¹⁶⁴ Such supporters could be a mixed blessing, especially if, as seems likely, they were only seeking their own advantage in obtaining patients who would have no protection in the form of official certification and visitation. In 1859, the private asylum owners within the Asylum Officers Association invited Bolden to present the Society's proposals at their meeting to discuss Walpole's bills, and a few of these were adopted. At this meeting, Conolly, who had come to believe that public asylums were exhibiting many of the faults foreseen by Perceval, argued that more notice should be taken of the Society's views,¹⁶⁵ and others had clearly given thought to its schemes as outlined in Walpole's bills. But it was the Commission ultimately that the Society had to influence.

The Society's importance lies in the wide panorama of ideas it laid before Shaftesbury's Board. Unrestrained by the traditions of bureaucratic office, it was free to explore a variety of alternatives for care of the insane, many of which were too visionary or impolitic to stand a chance of implementation. The difficulty it faced was the blinkered perspective of the Commission and of Shaftesbury in particular.¹⁶⁶ Some Commissioners showed themselves favourable to the Society's policies, but were restrained by the general tenor of Board policy from expressing this. Among the interesting ideas already mentioned were the licensing of attendants, sealed post boxes in asylums, and increased contact between the sexes within each institution. These ideas could have contributed materially to the welfare of patients, and all resurfaced later. All three had advantages that appealed to the Commission and even to the medical profession. The first might have prevented the high turnover of attendants in most asylums and discouraged poorer applicants, the second would have ensured the privacy of patients' communications, preventing abuse, and the third ought to have reduced the dreary institutionalization of asylum life. Unfortunately, all possessed disadvantages which a cautious bureaucracy could not gainsay. The first constituted an interference in private enterprise and the principle of *laissez-faire*, the second offended medical control of affairs in the asylum, and the last was inimical to Shaftesbury's moral beliefs.

Shaftesbury, with his overly sensitive nature, saw the Society's activities as a standing reproach to his Commission, and therefore promoted an obstructionist response to them, typical of the bureaucracies lampooned by Dickens in *Little*

¹⁶³ PRO/HO45/OS/7102, Nesbitt to Perceval, 24 May 1861. Nesbitt and his wife left Northampton in 1859, and had great difficulty in obtaining a licence from the Commissioners. Nesbitt would certainly have benefited from any moves to allow voluntary patients, and it was because of characters like him that the Commission was reluctant to permit informal admission.

¹⁶⁴ Ogilvie had been forced to move asylums several times, because he kept voluntary patients illegally. In 1851, he was refused a licence for Blythe House, Turnham Green, by the Commissioners. See PP 1859, Sess. II, VII, p. 35. Also MH50/5, 12 June 1851.

¹⁶⁵ *J. Ment Sci.*, 28 February 1859, 5: 392.

¹⁶⁶ For a description of Shaftesbury's views, see Hervey op. cit., note 64 above, pp. 181–184. Also Finlayson op. cit., note 13 above, pp. 559–609.

Dorrit.¹⁶⁷ The Society was refused copies of patients' certificates on minor technicalities, and Bolden claimed that the Board actually laundered those copies it did issue. Certainly, the Society was never given one which did not provide a legal justification for detention. The Society received shabby treatment from the Board in other respects too. In 1858, Saumarez reported the existence of an uncertificated patient confined in Hampshire. Normal Commission policy was to protect the identity of informants, and yet in this case it revealed Saumarez's name as its source.¹⁶⁸ The same year, Saumarez reported the death of a patient due to ill-usage at Surrey County Asylum, intimating that Perceval had also written to the Home Office. A full ten days later, one of the Commissioners consulted Shaftesbury, who was of the opinion that, "as Admiral Saumarez had stated that the matter had been brought under the notice of the Home Secretary, the Board should not take any step at present—but that if any communication was received from the Home Office, two Commissioners should at once visit."¹⁶⁹ Clearly, this course, whilst leaving initial investigations to the local visiting magistrates, might well be constructed as negligent, not to say dismissive of the Society's information.

Despite these slights, the Commission did sometimes thank the Society for its contributions, and the latter must undoubtedly take some responsibility for the hostile attitude of others. Often it lacked subtlety, inviting rejection and disparagement. The collective membership were not entirely blameless either, in that they endorsed the inclusion of Perceval's more ridiculous ideas in bills and petitions to eminent figures of the day, which naturally diluted the impact of their other proposals. In any assessment of a pressure group, the danger lies in overvaluation of its contribution, but in this instance there is the added pitfall of becoming enmeshed in the persecutory flavour which the Society imparted to all comment on its activities. Their undoubted contribution was to exert continuous pressure on the Commission during its first twenty years in office, causing constant reappraisal of its policies. It was the Society's misfortune that myths about mental illness at this era were prejudicial to its advanced thinking, but it was able to provide substantial support to individual patients, and initiate inquiries into the management of numerous asylums. Its work in several fields, e.g., Chancery reform, the plight of criminal lunatics,¹⁷⁰ and improvement of asylums conditions, has never been acknowledged, and altogether it deserved better support than it attracted.

Clearly, the Society is also very significant as the first organized manifestation of public apprehension about operation of the lunacy laws. Although it did not feature in the most celebrated cases of wrongful confinement, its espousal of further safeguards in admission procedures, invoking traditional legal rights, was something that had

¹⁶⁷ In 1859, Perceval remarked that they had never taken a liberal view of their duties, proceeding by remedies of cure rather than those of prevention. See Charles Dickens, *Little Dorrit*, ch. 10.

¹⁶⁸ MH50/9, 14 September 1858.

¹⁶⁹ MH50/10, 5 and 15 October 1858. See also MH50/13, 6 September 1864.

¹⁷⁰ Saumarez complained in 1859 to the Select Committee that criminal patients who were transferred from prison to asylums were often kept there after their sentences had expired, sometimes for up to fifteen years. He felt they should have regular medical reviews of their condition and complained that the Home Secretary and Board refused him access with a doctor to assess patients and yet would not discharge them without medical evidence. (PP 1859, Sess. 2, VII, pp. 11-12.)

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appeal. McCandless's study, although demonstrating that there were few wrongful confinements of the sane, did not fully highlight the situation of many unwell people who were unnecessarily confined by their families.¹⁷¹ In 1859, J. S. Mill criticized the "contemptible and frightful" evidence on which people were declared unfit to manage their own affairs. His point, and the Society's, was that medical prerogatives had expanded definitions of insanity to a point at which they encroached on the borders of eccentric, immoral, and even criminal behaviour. Roger Smith has illustrated how the concept of responsibility was gradually eroded by alienists' medicalization of crime, and the ALFS was concerned that a similar process was occurring with the epileptic and mentally subnormal. It was critical of the 1845 County Asylum Act, which encouraged the confinement of these groups, seeing it as quite unnecessary in most cases. However, it was not possible for such a small group to do more than raise consciousness about the poor level of asylum care, and question the growing faith placed in medical expertise. Scull's work has demonstrated the element of social control inherent in the county asylum system, and Perceval, too, made a great deal of this. But one suspects that the vast majority of those confined were sufficiently ill to justify detention, and that the usefulness of an organization such as this was continually to challenge the parameters of mental illness laid down by others. Curiously for a movement which often sought publicity, the ALFS did most of its effective work out of the limelight, in constant exchanges with the Home Office and Lunacy Commission. Given the general lack of public interest in lunacy, it is doubtful whether the Society could ever have attracted widespread support, but its limited following can be attributed in part to the reputation it gained for intrusive and insensitive investigations. At times, it overstated its case, but more often than not, very real abuses were uncovered, and it would not be an exaggeration of the Society's worth to say that patients' rights, asylum care, and medical accountability all suffered with its demise in the 1860s.

¹⁷¹ The ALFS highlighted many cases like that of Miss Mackray, whom they reported as under restraint as a lunatic in a house in Upper Holloway, since her discharge by order of the Board from Elm House, Chelsea. Miss Mackray was clearly ill, but not in need of confinement. MH50/9, 4 August 1857.

CHAPTER SIX

A slavish bowing down: the Lunacy Commission and the psychiatric profession 1845-60

N. Hervey

MUCH HAS BEEN written about the growth of central administration in nineteenth-century England, and study of the Lunacy Commission provides further comparative material, while highlighting several new issues. Before examining these, however, it is important to provide some introduction to the history of asylum inspection and the forces at work prior to the 1845 Lunacy Acts which eventually established a full time board, responsible for the nationwide visitation of asylums.

Early inspection of the insane 1774-1845

The earliest proposal for the licensing and inspection of asylums was in 1754, when the College of Physicians were asked to undertake the supervision of private madhouses.¹ They rejected the idea as too troublesome, although it also probably ran counter to the vested interest some physicians had in these institutions. Not until 1763 was a House of Commons Select Committee appointed to investigate claims of cruelty and illegal confinement in madhouses. Leave was given to bring in a bill, which finally reached the statute books in 1774, as the Madhouse Act.² This established the licensing and inspection of madhouses in London and within a seven-mile radius thereof, by five commissioners, annually appointed by the College of Physicians.³ In the provinces a group of visiting magistrates appointed by quarter sessions in each county were to fulfil the same task, accompanied by a doctor.

The main aim of this legislation was to prevent illegal reception of the sane, and for this reason it concerned itself little with the mechanics of inspection, or indeed with the real plight of madhouse inmates. It failed to provide the new inspectorate with sufficient executive powers, and hampered them by placing limitations on the performance of several tasks. The

commissioners were unable to refuse a licence whatever the state of an asylum, and visitations were only to take place between 8 am and 5 pm. Furthermore, the new system of certification, whereby a patient could be admitted only on an order signed by a doctor, did not apply to pauper patients, who were left unprotected. Until the enactment of legislation in 1828, the commissioners and provincial magistrates were often forced to accept conditions inferior to those found in the best houses, owing to the obdurate refusal of proprietors to implement changes. The greatest weakness of this Act, however, was that it established an inspectorate composed of men who already had close personal and professional links with asylum proprietors.⁴ Allied to this, the continual rotation in the appointment of commissioners meant that no corpus of administrative expertise was established in the metropolis, and little continuity was possible.

Further moves were initiated between 1814 and 1819 to improve the inspection provided by the College of Physicians, but these did not stem from within. A group of interested philanthropists, evangelicals, asylum governors, and magistrates led by Sir George Rose,⁵ began to campaign for more efficient controls over the management of asylums, following revelations of the maltreatment of patients at Bethlem and York in 1814. In 1815, a Select Committee to consider the better regulation of madhouses was established, which exposed the lax attitude adopted by the College commissioners to their duties since 1774. The Quaker businessman, Edward Wakefield, suggested that medical persons were the most unfit of any class of persons to be inspectors, and cited as evidence of their perfidy the fact that most public asylum superintendents kept private madhouses elsewhere which diverted them from their public duties.⁶ Dr John Weir, the Inspector of Naval Hospitals, testified that the only solution was a permanent board of three members,⁷ under the Home Secretary, who would be salaried and empowered to visit, report on, and control every institution for the insane throughout England.

The idea of a new inspectorate independent of the College of Physicians appealed to some asylum owners with a surgical background, who resented superiority affected by the College.⁸ Other proprietors such as G.M. Burrows, who had close links with the College, were anxious to prevent the Home Secretary usurping its authority. He was not uncritical of the College, decrying the continual turnover of commissioners, but feared that if in control, the Home Secretary would appoint unqualified lay commissioners, thus passing control of the subject out of medical hands.⁹ Despite the drafting of bills in 1814, 1816, 1817, and 1819, however, no legislation was enacted. Lord Chancellor Eldon opposed any interference in the privacy enjoyed by Chancery patients and objected to clauses in these bills which envisaged an extension of state control over private enterprise in this field.

The issue of further state interference then receded until 1827, when Garrett Dillon, surgeon to St Pancras Parish, who had been gathering evidence of abuses at the Hoxton madhouses, approached Lord Robert Seymour asking him to move for another Select Committee.¹⁰ Seymour, a

Middlesex magistrate and active governor of Bethlem, had remained interested in this subject since his involvement with the 1815 Select Committee, but was reluctant to act, believing that too many parties were still opposed to government interference. Dillon however persuaded him and Robert Gordon, a fellow magistrate, to become involved. As Seymour was a sick man, Gordon assumed control. He became the driving force behind the Select Committee and its resultant legislation.¹¹ Two related issues emerged strongly from this enquiry. One was the struggle for paramountcy between physicians and surgeons where inspection of asylums was concerned. The other was a generalized resistance amongst doctors to outside interference in regulation of this subject.

The Select Committee clearly illustrated how defective the College commissioners' visitation had been. Their secretary, John Bright, acknowledged that they had never framed any regulations for madhouses and the testimony of different commissioners as to the purpose of their superintendence was confused. William Macmichael¹² stated that their visits were to monitor the management of asylums rather than adjudicate precise points of insanity in individual cases, whereas Thomas Turner¹³ claimed he was not looking to the treatments offered, 'but only whether people were mad or not'. The Select Committee were keen to remedy this state of things.

Of its twenty-nine members, seven were leading evangelicals and these men formed a core who were in favour of promoting the role of magistrates as visitors.¹⁴ Some proprietors supported this. Edward Long Fox, owner of Brislington House stated that he would be sorry to be entrusted with 'so much of that power as necessarily is given to me . . . without the supervision of those persons in whom the country ought to confide'.¹⁵ In its report, the Select Committee specifically recommended that the Home Secretary take charge of visitation, appointing at least five magistrates amongst those to inspect metropolitan asylums. The evangelicals influenced the whole spirit of this Select Committee, and the questionnaire circulated to asylums reflected their dominant preoccupations: the desirability of personal control, the prejudicial effects of indolence, and the benefits of religious consolation. They went much further, however, in seeking to establish basic standards of asylum management which could be universalized by a central authority. For them, the paternalistic management of patients advocated within the pastoral model of the York Retreat¹⁶ was preferable to the establishment of a medical model of treatment. In his evidence, Sir Anthony Carlisle, suggested that doctors' treatments should be made public, as their professional mystique had led to a great want of knowledge amongst practitioners.

This did not, however, reflect the thinking of most physicians. In 1828, two bills were referred to the Lords, who set up their own Select Committee. The madhouse doctors and College commissioners who gave evidence before this all expressed opposition to outside interference in professional practice. They were opposed to the concept of keeping registers which would be open to inspection and disagreed with night visitations as disruptive for patients. Most were antagonistic to daily medical attendance

on patients, and to a man the College commissioners opposed the introduction of surgeons to visitational duties.

It became evident that a large measure of collusion had existed between the commissioners and those they supervised, since 1774. John Latham, a former commissioner and President of the College of Physicians expressed himself in favour of coercion, quoting from the Bible on the use of chains, while William Heberden favoured the use of cribs and straw for dirty patients. His reasons for continuing the College's role as commissioners were quite laughable. He wrote, 'There is this reason for wishing to continue it, that it is a little slur upon persons, after having had such a thing for a time, to have it taken away from them.' More damaging for the future of the commission however were Thomas Turner's attitudes. He remained a commissioner until 1856, and was firmly in the mould of a gentleman physician. Not for him the robust, prying qualities demanded of an inspector. He opposed any enquiry into medical treatments and, contrary to the beliefs of the evangelical reformers, was opposed to divine service in asylums, stating that it was a profanation of such a holy ceremony.¹⁷

Inevitably, in face of the traditional role of the College and the need for some expertise, a compromise was reached in which lay members were introduced alongside medical members in the new board. The Madhouse Act of 1828 established a Metropolitan Lunacy Commission consisting of five doctors and up to fifteen lay commissioners. The professional commissioners alone were to be paid and the powers afforded this body were considerably greater than those of its predecessors. It could revoke or refuse to renew a licence after due notice to the Home Secretary. The commissioners were to visit licensed asylums quarterly and might discharge those improperly detained. The certification system was tightened up, as were the requirements concerning returns of patients and records of their treatment. A resident medical officer was now required in establishments with over 100 patients and the Lords inserted a clause that divine service should be performed in licensed houses on a Sunday. Most important of all, the Act instituted several penalty clauses which required the prosecution of certain offences.¹⁸

Both the College and madhouse owners campaigned hard against the bill, on the grounds that it infringed on professional practice, and disturbed the private contract made between doctors and their patients, or patients' families.¹⁹ S.W. Nicoll, the Recorder of York, opposed the new board on the grounds that it would be administratively top heavy and ineffective.²⁰ In the event both fears proved to be without substance. The new Metropolitan Lunacy Commission started inauspiciously, however, as the Home Secretary Peel, was quite unprepared for the rapid appointment of commissioners required by the Act.²¹ He inadvertently approached Gordon to head it, before realizing that Granville Somerset was the senior parliamentarian of the two interested in this subject.²² Peel was, however, keen to select the best physicians and referred their appointment to Sir Henry Hallford, President of the College, ensuring that its interest was by no means disregarded.²³ As

for the lay commissioners, Gordon suggested several fellow county magistrates, and the rest were chosen from parliamentarians who had sat on the Select Committee.²⁴

The only precedents for such a body were the unwieldy boards established in the eighteenth century which had been designed to remove sole executive decision making from powerful individuals and render their departments accountable to Parliament.²⁵ Attachment of this commission to the Home Office clearly had a similar object in mind, a view which is strengthened by evidence that between 1828 and 1845 there was always a member of the commission who was also attached, in some capacity, to the Treasury, providing the government with financial leverage over its workings.²⁶

Initially there was great interest in this board, and its immediate impact was considerable. Two private asylums had their licenses revoked, and other asylums subsequently made wide-ranging alterations to their management. Before long, however, rather than proving top heavy, the commission ran into difficulties owing to the reluctance of some lay commissioners to participate at all. In 1833 Shaftesbury reported to Lord Brougham, the Lord Chancellor, that 'many whose names are on the list, are either unwilling or unable to take any share in the business'.²⁷ It was mostly the parliamentarians who were unable to assist the commission in its work,²⁸ and Shaftesbury therefore increasingly recommended magistrates as lay members, although several important parliamentarians were subsequently appointed.²⁹

Brougham had in fact already contributed to a significant change in the commission's structure the previous year. He disliked the preponderance of Tory MPs on the commission, a view shared by several doctors. John Haslam believed the commission's first report reflected only the influence of its parliamentary members,³⁰ while Halford in a memorandum prepared for Brougham referred to the unwieldy contrivance of attaching Middlesex magistrates to the commission, when physicians alone should have sufficed.³¹ Brougham's 1832 Act for the Care and Treatment of Insane Persons effected a compromise by reducing the lay commissioners and increasing the professionals. He had written to Halford in 1831, 'the Bill we have got quite altered – My plan has been nearly taken up to have the Board professional chiefly. I wanted the college to appoint the medical portion – but the whole has been given to the Great Seal.' He now pledged that while he remained in office medical appointments would be referred to Halford, thus giving the College of Physicians a prominent voice, but also undermining the establishment of a truly independent inspectorate.³² More important, the Act drafted two barristers onto the commission, and Brougham's nominees, Mylne and Procter, were to play a vital role in future developments. Without them, Shaftesbury stated in 1845, the doctors would have been nearly powerless and the whole Board would have stagnated.³³

Other clauses in the Act lowered the numbers rendering commission meetings quorate and abolished the requirement that lay commissioners

must accompany doctors on visitations. Now a barrister could fulfil this role. As Brougham intended, these changes increased the influence of professional commissioners, and it is important to acknowledge that the change from a large commission in 1828 to a streamlined one in 1845, went through intermediate phases. As O. MacDonagh has suggested, the process of government growth was a gradual one, built on the experience of field executives who pointed up deficiencies in the system.³⁴

From 1832 to 1845, an uneasy alliance existed between the lay and professional commissioners. A significant measure of disagreement existed concerning the importance of religious consolation, the use of work as therapy, and other tenets of the moral treatment canon, which the evangelicals were keen to embrace. Shaftesbury even undermined the emphasis his medical commissioners placed on the paramountcy of medical superintendents in public asylums, by secretly supporting the appointment of a lay governor to overall charge of Hanwell Asylum in 1841.³⁵ These tensions were played down by their Secretary, Edward Dubois,³⁶ whose letters illustrate the problems of communication between lay and professional commissioners who did not meet regularly as a board. Contrary to previous accounts, however, they did establish some successful strategies for improving the condition of London madhouses, but were always aware of the deficiencies in provincial asylums.

In 1842, Granville Somerset obtained legislation which added two barristers and two doctors to the board. Their powers of inspection were extended to provincial asylums and the professionals' emoluments for extra-metropolitan visitations increased. In 1844 they produced a report on the condition of asylums in England and Wales which amply illustrated the terrible state of provincial madhouses, and the following year a full-time commission was established. The 1845 lunacy bills were the work of the legal commissioners, not Lord Shaftesbury or the medical ones, and Dubois claimed they were 'concocted in the dark', by R.W.S. Lutwidge and the other lawyers who hoped to feather their own nest.³⁷ In fact, Procter (a lawyer) mapped out most of the clauses, which were based on the experience of his fellow commissioners,³⁸ and it is clear that the professional commissioners already held a strong position on the board. The choice of personnel for the new commission was clearly going to be of vital importance.

Shaftesbury and the commission's personnel

The Lunacy Commission, established in 1845, consisted of six full-time professionals (three medical and three legal). Their duties included visitation of private asylums, county asylums, workhouses, and hospitals throughout the country,³⁹ although local magistrates retained the main responsibility for provincial asylums. The board were empowered to visit and make a return of all single patients kept for profit, and were afforded some powers to alter the regime of private asylums. Also, in conjunction with the Home Secretary,

they were to supervise construction and management of the new county asylums. For the first time, a central body was authorized to monitor practice and establish standards relating to medical certification, asylum management, and the care of patients on a nationwide basis. It was essential to select an inspectorate of the highest calibre.

Shaftesbury recognized this and noted,

'the success of the Commission will depend humanly speaking on the character of its officers. We must have the best men in every sense of the word; men who can speak with authority to the skilful and experienced persons with whom they will always be in contact and sometimes collision.'⁴⁰

In fact, Shaftesbury perpetuated the weakness of former inspectorates by selecting commissioners whose long acquaintance with private practice and traditional forms of care undermined the board's standing as an independent and impartial authority. Before turning to these men, though, it is important to provide some account of Shaftesbury's views in order to understand how he made his choice and what he expected from the commission.

In parliament Shaftesbury usually rehearsed a well-worn theme of the prodigious advances which had occurred since he first assumed office in 1828, depicting former barbarities such as the use of manacles, straw, and hosing down for dirty patients.⁴¹ The horrific scenes he witnessed as a young man had indelibly stamped his memory and to some extent explain the undemanding yardstick he subsequently employed for the board's progress. Shaftesbury was noted for his interest in scientific innovations, and was not slow to grasp the significance of moral treatment and non-restraint. However, he retained a lay view of them and never acknowledged the scientific basis medical practitioners claimed for them. Tuke and Conolly had both eschewed medicine to a large extent in promoting treatments which rested on regimen,⁴² and Shaftesbury shared their perspective. He was less convinced by the medical profession's claim to expertise in this field than in others such as public health, and throughout his career piqued psychiatric practitioners with references to the incompetence of medical men. He stated on several occasions that a layman could give as good an opinion on the existence of insanity as a doctor.⁴³

These views had serious implications for the commission, which constantly proved reactionary when confronted with new treatments.⁴⁴ Shaftesbury often gave the lead to his colleagues, making crude generalizations about mental illness. In 1859 he informed the Select Committee on Lunatics that the main cause of insanity was intemperance, claiming that it was instrumental in 50 per cent of cases, and that because temperance societies had reduced the level of alcohol consumption, the numbers of insane were diminishing. In fact they were increasing rapidly. His evidence contained similar generalizations concerning the greater prevalence of insanity in Roman Catholic countries, and amongst High Church rather than Low Church adherents.⁴⁵ These remarks were a congeries of imperfect observa-

tions, preconceived prejudices and direct falsehoods, but carried weight because of Shaftesbury's importance. There was indeed a self-deceptive dishonesty about the way he passed off personal opinions as the received knowledge of the commission.

Shaftesbury never lost this loose and popular perspective of lunacy, ascribing it at other times to commercial speculation and railway travel, and yet he could lay aside his moral and political prejudices when considering individual cases, where the boundaries of mental illness came under closer scrutiny. A highly sensitive man, he saw himself as a victim of the perpetual agitation in Victorian society. He clearly suffered from disparities created by the conflicting demands of his aristocratic background and the kind of work he undertook, by the gap between his moral beliefs and the existing state of society, and by the struggle between the cancer of personal ambition and the self-denial enjoined by his evangelical convictions. Several contemporaries noted a hint of instability in his make-up,⁴⁶ and he himself dwelt on the possibility of becoming mentally ill. Often overworked and ill, Shaftesbury impressed fellow commissioners with his irritable, morose, and introspective nature⁴⁷ and often contemplated giving up public office.⁴⁸

Shaftesbury retained a special feeling for the Lunacy Commission, however, which he believed was a pioneering body. He claimed it was unique because the inspectorate were also an integral part of the executive, being free to interpret board policy with almost invariable endorsement for their actions.⁴⁹ It was a matter of some pride to him that decision-making was a democratic process, although he underestimated the inhibiting nature of his presence on other commissioners. As the board's parliamentary spokesman, Shaftesbury's apolitical nature was important in negotiating with successive governments, but alongside this must be placed the damaging effects of his social and religious beliefs.

Like most of his colleagues, he had long acquaintance with asylum owners, and in some respects was not unsympathetic to them. The scion of a noble family, Shaftesbury employed a double standard. Privately he considered the upper classes had a right to absolute privacy, and yet publicly he inveighed against the licensed houses and lodgings in which they were kept. With this perspective he could not initiate his threatened closure of private asylums, as these classes would then have had no provision but single lodgings.⁵⁰ Shaftesbury did attempt to found subscription hospitals for the wealthier classes, but his appeals failed to kindle support.⁵¹ His true beliefs are highlighted by the fact that when his son Maurice became mentally disturbed with epilepsy, he arranged private lodgings in Lausanne, Switzerland, for him, rather than asylum care.⁵² These lodgings are interesting in view of his lifelong opposition to placing patients abroad, where they had no protection, by way of visitation.

As for Shaftesbury's religious convictions, these were most influential, because he often appointed commissioners who shared his views. Gordon, Vernon Smith, Lutwidge, Nairne and Campbell constituted an important group, whose moral beliefs were reflected in many of the board's policies.⁵³

They constantly stressed the need to separate the sexes and maintain appropriate social conduct and standards in asylums. As Foucault noted, quiet and tranquil behaviour was praised at York Retreat, where patients were encouraged to emulate Quaker standards.⁵⁴ In later nineteenth-century asylums, the call for tranquillity was a reflection of Shaftesbury's sabbatarianism. The literature in asylum libraries, the emphasis on work and neat dress, were all an extension of this bias, and eventually led to a collapse of therapeutic initiatives. In fact Shaftesbury's recruitment of personnel explains many of the difficulties subsequently experienced in the board's relations with the psychiatric profession.

Between 1828 and 1845 a philosophy of practice had evolved, and Shaftesbury felt obliged to reappoint former commissioners. In August 1845 he recorded,

'Dr Southey has resigned, and I have implored the Chancellor to appoint Dr Prichard in his place . . . Prichard has a reputation and is by far the most superior of the remaining former Commissioners and as being one of these we cannot pass him over. But he wants capacity as a Visitor of asylums.'⁵⁵

Here Shaftesbury faced the dilemma that in selecting men who could exert influence over asylum superintendents, namely those noted for their private practice, and in fact the type of practitioners later shunned as commissioners, he was also appointing a group essentially empathic to the private sector. There are many examples of this empathy. Prichard and Hume continued to attend parties given by leading alienists such as Morison and Sutherland,⁵⁶ Lutwidge was a long-standing acquaintance of F.B. Winslow who was often dealt with leniently by the commission⁵⁷ and Procter mentions his sympathy for Forster's friend Charles Elliott of Munster House who was hauled up before the board for some infringement of the laws.⁵⁸ These sympathies did not altogether prevent the board from acting, but it is evident that they instituted more stringent controls over licensed asylums and single patients only after the appointment of two ex-county asylum superintendents as commissioners in the 1850s.⁵⁹ The original 1845 appointees had all been brought up on a pabulum of fees and connections and were heavily indebted to patronage.⁶⁰

The result of this recruitment policy, was the appointment of men who provided a prop to many of Shaftesbury's prejudices, men who subsequently found it difficult to depart from the collective influence of the board. While Shaftesbury spoke of the harmony existing within the department, the result of gradually adding members to a long-standing nucleus, several commissioners felt unable to express their opposition to the board's policies openly. Gaskell campaigned in the *Journal of Mental Science* for the voluntary admission of patients, while Lutwidge and Wilkes voiced their differences of opinion, when appointed to a commission investigating the condition of Irish asylums.⁶¹ Both Procter and Forster also used public journals to air

their views.⁶² In 1863 Forster asked the *Examiner* to highlight Colonel Jebb's unhealthy influence at the Home Office, which had secured the exclusion of someone he favoured for the new Broadmoor Asylum Commission. This too at a time when the board was collaborating with Jebb on plans for Broadmoor.⁶³

These individual attempts at dissent, were complemented by the formation of interest groups within the commission, which attempted to act in concert. From 1855 onwards, Procter, Forster, Gaskell, and Wilkes formed a clique which dined together, covered one another's duties and attempted to bypass Lutwidge for whom they shared a mutual dislike.⁶⁴ The latter more naturally gravitated towards the churchmen on the commission. In many respects, however, the greatest threat to the board's workings was posed by the lay commissioners. The role of these men has been undervalued, although Shaftesbury considered them of indispensable importance. He claimed that they provided the board with the status needed to influence county magistrates who were responsible for the local administration and inspection of asylums.⁶⁵ His view of them was not shared wholeheartedly by the professional commissioners. Procter thought Gordon a zealot of the worst kind, remarking of him: 'He did not come to the last Board. Thank God for all things. He should never be here without Lord Shaftesbury to control him.'⁶⁶ Nevertheless, lay commissioners played an important role in visitation, special enquiries, and formulation of policy. They were also employed as go-betweens to various government offices, often with verbal instructions alone. It was this style of government, which Shaftesbury endorsed, that Chadwick had objected to at the Poor Law Board, because it bypassed other members of the board and had no clear accountability attached.⁶⁷ In August 1846 Shaftesbury was furious with Lord Seymour, who had been briefed by his professional colleagues but failed to appear in parliament to defend the commission, in the Haydock Lodge scandal.⁶⁸ More culpable still was Colonel Clifford, another lay commissioner. In 1863 Procter wrote to Forster concerning a clause inserted at the last minute into the new lunacy bill:

'It will doubtless have the effect of converting workhouses into asylums, unless we are very firm in restricting it. Now I am going to tell you a secret. The new clause, I believe, was suggested . . . by Clifford . . . not a word of this, I will explain.'⁶⁹

Clifford was also a magistrate in Hereford and Monmouth, where local justices were anxious to avoid expense on asylum care. In this instance he was supporting a move to allow workhouses to draw patients from a wide catchment area for their lunatic wards, in opposition to everything the commission stood for. Evidently the two hats he wore were incompatible, and he was not serving the board's best interests.

Generally speaking, however, the commission presented a united front in public, although it was often at the expense of innovative policy-making.

The early formulation of policy

Given the men selected for the new commission, it was not surprising that it was the Home Office which initially took the lead in promoting minimal standards of asylum care, to be uniformly applied nationwide. The medical commissioners wanted to leave the management of asylums and keeping of records to the discretion of individual superintendents. In May 1846 the board informed the Home Secretary, Sir James Graham, that having considered the regime at various asylums it was scarcely practicable to frame any general rules. However, under pressure from the Home Office, which had been appointed to superintend the county asylum building programme, the board consulted Mr Perry, a prison inspector, concerning administrative systems they might adopt. The medical commissioners were opposed to the rigid categories Perry recommended for recording information in medical casebooks, but their views were overridden, and detailed registers implemented.⁷⁰ Some practitioners saw the failure of Hume, Turner, and Prichard to perpetuate the old regulations and methods of care as a sign of weakness and assumed that the General Asylum Rules promulgated in 1846 were the handiwork of the legal commissioners. Wakley remarked in the *Lancet* that Hume and Turner were 'hardly fitted to uphold their profession against the three active lawyers who act as the legal Commissioners',⁷¹ and others suggested that they were not sufficiently acquainted with the new moral treatment and non-restraint systems, being wedded to the old concept that a quantity of physick would do.⁷²

Certainly, apart from Prichard's reputation as an alienist, the medical commissioners could not be termed experts in this field. In order to get round this, the board centred its attention on the physical condition of asylums and libertarian issues surrounding the freedom of patients. When the scandal at Haydock Lodge erupted in 1846, Grey stoutly defended the commission in parliament, suggesting that it should not be seen as a cure-all. He was keen that the board should establish its status as a repository of expertise and argued that it needed longer to raise standards throughout the country. He willingly empowered the board to employ architects, public health inspectors, and engineers, which gradually increased its standing as a body with specialized knowledge in the field of asylum construction and management. The authority of individual commissioners remained limited at this time however. They completed their circuits of visitations and presented reports to the board, who took decisions as a group. Initially, many people continued to approach the Home Office as the ultimate authority in matters relating to lunacy but, increasingly, as they were referred to the commission its position became established.⁷³

In view of the fact that none of its medical commissioners had experience as asylum superintendents, one would have expected considerable resistance to the new commission from practitioners managing asylums in both the public and private sectors of psychiatry, who had their own systems of care to defend. This was especially true of the public asylums from which the

board had drawn its model of practice, and we must now turn to an examination of their response to the commission.

The Lunacy Commission and public asylums

In the late 1850s, James Huxley,⁷⁴ the superintendent of Kent County Asylum, was one of a number of doctors who began to voice serious misgivings about the relationship developing between the commission and practitioners working in county asylums. In a series of articles, he delineated the gradual intrusion of a central authority which had resolved as early as 1846 that with a few exceptions, 'where peculiar systems have worked and some deviation may be permitted, in all asylums hereafter to be erected . . . a substantial adherence to the Printed General Rules should be enforced'.⁷⁵ Huxley saw the board's desire for uniformity as the thin end of the wedge, claiming that 'a slavish bowing down' was what they wanted as the 'best preparation of the soil, for their crop of encroachments'. In particular he noted a want of proper independence in the tone taken by some superintendents towards the commission.⁷⁶ To some contemporaries this resulted from the exclusive position the Board had created for superintendents in public asylums. The *Medical Circular* suggested that whenever a particular duty was confided exclusively to one group who were protected from external control, there was a tendency to passive sloth, maintenance of the status quo, and resistance to innovation.⁷⁷ Andrew Scull has argued a similar thesis, remarking that the board essentially collaborated with the medical profession in establishing a hegemony for doctors in public asylums. He stressed the commission's basic acceptance of the asylum solution for growing numbers of insane paupers, and traced their subsequent theoretical legerdemain in accepting a degeneration from curative ideals to custodial reality.⁷⁸ David Mellett has also suggested that public sector doctors were more attuned to the principle of state control than private practitioners, provided medical prerogatives were recognized.⁷⁹ What these commentators have failed to highlight was the instrumental role Shaftesbury's commission played in turning county asylums into cocoons of dullness, and the considerable resistance many superintendents attempted to put up to central control.

With the imposition of specific guidelines, it was inevitable that local magistrates responsible for managing public asylums, many of whom were very experienced, would begin to question the board's knowledge base. In 1847, the governors of Lincoln Hospital roundly criticized Turner and Mylne for interference in their therapeutic regime. These commissioners impugned the monthly rotation of three medical officers which produced a confused treatment programme. They also objected to the lack of classification, the absence of a steward, indiscriminate admission of visitors, and the poor quality of keepers. Finally, in opposition, as the commission saw it, to the spirit of non-restraint founded at Lincoln, the lack of a seclusion room

was noted. The governors interpreted these criticisms as a 'hasty pledge' to erase local differences and an attempt to prevent the development of new forms of treatment. In particular, they questioned the board's espousal of seclusion rooms, preferring that patients should associated with each other. The governors implied that the board had deduced this and several other practices from the economy of prisons and condemned its use of words such as 'keeper' and 'cell' which implied the care of felons. Lincoln's plea was that they had developed their regime through years of trial and error and it was suited to local conditions.⁸⁰ It is evident that the board feared Lincoln's ability to set up an alternative model to their own, especially as subscription hospitals did not have to submit their rules to the Home Secretary for approval at this time.⁸¹ Indeed, several of the policies they criticized for the sake of establishing uniformity and therapeutic control were later adopted by the board itself.⁸²

Many public asylums had developed their own practices, and the above scenario was enacted at other institutions, although not always so publicly. The commission made ruthless use of their annual reports to shame institutions into change, and when finally granted access to Bethlem in 1851, observed only the barest decencies in their assault on the hospital.⁸³ Shaftesbury was anxious not to afford any special status to charity hospitals, and was annoyed by Bethlem's exclusion from the 1845 Lunacy Acts. The commissioners entered Bethlem with a preconceived notion of what to expect, and made extensive use of leading questions in their enquiry to elicit faults they intended to find. They undoubtedly failed to treat testimony favourable to their case with the same care applied to other evidence, and during their investigation broke all the rules of evidence. Nevertheless, doctors at the hospital found it difficult to defend themselves on any other grounds than that the board's enquiry was unfairly conducted. The evidence was clear. There were no specialist wards for sick patients, virtually no medical records existed, the attendants were insufficiently supervised, and very little was done to provide work or entertainment for patients who spent most of their time in damp, dark, straw-filled cells. The rapidity with which the commission forced change on the hospital, and the collapse of their medical officers when questioned about their professional practice, were a further warning to doctors that they no longer had sole possession of the field.⁸⁴

It was this that concerned Huxley most, as the boundaries between administrative authority and medical autonomy were still fluid at this time. Until the mid-1850s a symbiotic relationship existed between practitioners and the commission, in which the former felt free to advise, criticize, and correct the board. Since then, Huxley believed, asylum superintendents had abdicated their role as arbiters of correct medical practice by their servile approach to the commission. To some extent this was understandable as many feared an outspoken attitude would cost them their posts.⁸⁵ Unfortunately, the consequence of conceding that the commission could force statistics and information, gathered nationwide, into a giant alembic, and

produce universally applicable policies, was that they relinquished their position as experts in the field. In 1859, Lutwidge claimed that the board did not dictate medical practice, but in the absence of a consensus amongst doctors it was in fact quite willing to do so. Three years earlier, considerable controversy had erupted over the use of shower baths following a death at Surrey Asylum. The board having researched existing practice laid down strict guidelines for their future employment.⁸⁶ Huxley was among those who refused to return questionnaires about this treatment on the grounds that it was a medical matter, but with each issue that arose, more practitioners gave way to the board.

Even superintendents like Bucknill, who ostensibly supported the commission, differed from them on many treatment issues.⁸⁷ Bucknill believed the medical commissioners failed to represent the interests of scientific medicine, and welcomed the appointment of Gaskell, an ex-county asylum superintendent, in 1848. He still felt however that the latter's opinions suffered deterioration by being averaged with those of less qualified medical commissioners. Huxley interpreted this appointment, and that of Wilkes in 1855, as the cue for further dictation from the board. In order to trace the way in which the board developed its relations with county asylums, it is proposed to chart their contact with one in particular, Kent Asylum.

Established in 1833, Kent had an involved local magistracy, drawn from the local conservative landowning gentry who resented the encroachment of central authority. Initially the magistrates welcomed the new board but soon changed their attitude. In 1847 they refused to provide details of the attendants hired and sacked, and resisted attempts to alter their statistical recording in line with other asylums.⁸⁸ More significantly they provided Huxley with support on medical issues, endorsing his criticisms of the board in Kent's Asylum Reports.⁸⁹ In 1856 he attacked the night-watching scheme for dirty patients which stemmed from Gaskell's experience. He ridiculed the lack of thought behind the commission's blanket injunctions, juxtaposing their recommendations of long exhausting walks to procure sleep for patients with the idea of waking them four times a night to keep them clean.⁹⁰ Huxley also disliked the vigorous new form of visitation. Gone were the gentlemanly exchanges with Turner and Hume. Gaskell and Wilkes were to be found rummaging through cupboards, tasting food, and ransacking beds, and their thoroughness rubbed off on colleagues who felt obliged to adopt higher standards.

Unfortunately the Board's assumption of superior expertise made them increasingly intolerant of opposition. Huxley felt they were wedded to petty restrictions which deadened all therapeutic initiative. It seemed they wanted patients to eat, work, and sleep in a dull round of perpetual drill. He cited their refusal to allow patients to sit or lie on the floor as a tacit return to coercion, because attempts to move them on inevitably ended in struggles. Above all, he related Kent's problem to enforced enlargement of the asylum under pressure from the Board.⁹¹

Certainly its growth led to an increasing turnover of staff and a less caring

regime. The average working life of attendants dropped from three years in the 1840s, to only one year in the late 1850s. Those employed at Kent were mostly farming people or ex-forces personnel, who had few skills and certainly not the ability to manipulate patients' environments as part of their moral treatment. Between 1876 and 1878 the words most frequently used to describe them were 'brutish', 'dirty', 'ugly', and 'rude', and a fifth of those who left at this time were sacked, for cruelty, neglect of patients, or drinking while on duty.⁹² Unlike nurses in the 1840s, they were not trained on the job, and many more left because of restrictive rules at the asylum. It is clear from the servants' book that size and strength were the important criteria in staff selection, and the average age on employment was only twenty-four. Under the board's new regime, treatment consisted mainly of labouring in the fields which attendants had to participate in against their wishes. Medical casebooks reflect the minimal care afforded each patient and the much-lauded therapeutic value of the diet seems to have been exaggerated, as many staff left owing to its poor quality.⁹³ The extent to which Kent had changed under the commission's influence is reflected through the public's eyes. In 1851, at the time of the West Malling scandal concerning use of restraint in a local madhouse, several locals wrote to the board praising the county asylum,⁹⁴ but by the 1860s relatives' letters of complaint began to multiply. One nurse gave as her reason for leaving in 1879 that: 'The Maidstone people regard all nurses from this asylum as bad characters and insult them in the streets . . . too many of our nurses by their conduct in the open roads well justify the treatment they receive and bring disgrace on the Institution.'⁹⁵

Given the existence of the Association of Medical Officers of Asylums and Hospitals for the Insane,⁹⁶ why did this process of degeneration take place? One explanation is that superintendents, themselves products increasingly of the county asylum system, reflected it in their lack of initiative. Numerous patients discharged on trial were needlessly recalled to the asylum, because the requisite confirmation of their recovery was not forthcoming from the relieving officer. This lack of creative thinking had not been present before the 1850s. There was, in fact, considerable local resourcefulness from magistrates. Using family connections, justices had set up their own communication between asylums, spreading ideas and information.⁹⁷ The Asylum Officers Association had fulfilled a similar role before 1845, and, although less organized than the commission, had acted more in a spirit of free exchange.⁹⁸ But once the traditional composition of the magistracy lessened in the 1860s and 1870s, its commitment to fighting the board waned. Without their support, superintendents were unable to oppose the remorseless progress of the commission.

The board's relations with public asylums provide a classic illustration of divide and rule. The initial medical commissioners were not sufficiently forceful to insist on a wider range of discretion for superintendents, and the latter failed to unite against the outside dictation of practice. Hopes that Gaskell and Wilkes could change this pattern were ill-founded, as they had

already shown themselves to be imitators of Conolly, who already provided the board's model. In fact, their appointment ended all hopes of a commission committed to investigation of the pathology of mental illness. Could the private sector provide any sterner opposition?

The Lunacy Commission and private care of lunatics

Parry-Jones has stated that private asylum owners and practitioners were never able to achieve a corporate identity, failing to integrate or identify with county asylum superintendents within the Asylum Officers Association.⁹⁹ I believe this is wrong on both counts. There was, in fact, an extensive and cohesive network between licensed houses and private practitioners in lunacy, which stretched throughout the country and provided considerable opposition to the board, both on its own and through the Association. Before turning to this however, it is necessary to examine the board's attitude to the private sector.

D.J. Mellett has suggested that the formulation of lunacy legislation was generally in government hands, implying that the commission was a passive recipient of Home Office initiatives.¹⁰⁰ In fact, they were instrumental in drafting all legislation enacted after 1845, systematically storing information on loopholes in the law.¹⁰¹ Increasingly they sought authority to dictate the management of private asylums, but it was only after the appointment of Wilkes that the board made significant inroads into private practice. Initially, however, commissioners were ambivalent about the stance they should adopt. Despite Shaftesbury's antipathy towards them, private asylums continued to flourish. Parry-Jones suggested the most obvious reason for this, that they filled gaps in the provision of county asylums. Even when the latter were built, and madhouses forced to give up their pauper patients, proprietors could obtain new patients from the chronic population in workhouses, or increase their private patients.

An equally cogent explanation is that the board failed to work out a consistent ideology towards them and, in reacting to situations as they arose, found it impossible to maintain a credible consistency. In 1846, they licensed Camberwell House, last of the huge London pauper licensed houses. This would seem to be a torsion of everything Shaftesbury stood for. The commission's minutes, however, suggest that they had provisionally approved this new establishment while Shaftesbury was away, as he subsequently informed a deputation campaigning against it that the board 'would not feel justified in refusing a licence after the heavy outlay of expense made under reasonable expectation of its being granted'.¹⁰² It was not until 1851 that the commission systematically attempted to reduce the number of paupers in licensed asylums, and even then they merely substituted private patients for paupers, thereby perpetuating these institutions. In time, stipulations were made about the sex of patients and categories of

dangerousness that might be accepted, and, as the board showed no sign of phasing out these institutions, accusations were made that they were creating a monopoly for a few owners they favoured.¹⁰³

Like many bureaucracies attempting to impose controls over private enterprise, the Lunacy Commission fell into the trap of making it explicit that there were certain organizations they looked more kindly on than others. In years to come, asylum owners complained that they never singled out houses for praise, but this was a direct result of their experience.¹⁰⁴ Those houses the board had commended invariably used this in their advertising, and subsequently rested on their laurels. Despite its ambivalence about these asylums, the board did initiate some improvements almost immediately. They were inaccurately criticized by Conolly in 1849 when he claimed that the previous occupation and education of licence applicants were immaterial to the board.¹⁰⁵ In fact, Shaftesbury proposed a series of conditions for licence applicants that were enforced as early as 1846. His scheme epitomizes the commission's dilemma. In establishing conditions to ensure only applicants with the requisite capital and experience were chosen, he was in effect promoting the continuance and growth of these institutions, in contradistinction to his public utterances.¹⁰⁶

It was the imposition of controls over the appointment of madhouse medical officers, the levels of staffing and financial dealings of owners, rather than the much-vaunted visitation that eventually began to effect change. All these, however, were implemented only because of the board's control over the granting of licences.¹⁰⁷ David Roberts is among those who have referred to the moral authority, 'auctoritas', commissioners used to influence those they supervised,¹⁰⁸ but in practice the Lunacy Commission increasingly held the threat of licence revocation over proprietors to effect change. They were reluctant to use this ultimate weapon as it would mean ruin for the owner, and showed a persistent leniency towards offenders that went beyond a mere acknowledgement that repeated recourse to revocation would have been impractical.¹⁰⁹ In March, 1851, seven months after categorically resolving not to, they renewed Mrs Pierce's licence. Nevertheless they did impose myriad new conditions on owners, under threat, which gradually altered the therapeutic climate of asylums. In 1856, for instance, they agreed to license Grove End Villa only if Mrs Kerr gave assurances 'of her disposition to give effect therein to the recommendation so repeatedly made and entirely disregarded for an alteration of the system of non-association pursued there'.¹¹⁰ Their more stringent approach to private asylums however only emerged after 1855. Before that, the open sympathy of some commissioners for asylum owners was quite clear, and several continued to feel the same way. In 1859, W.G. Campbell suggested they should not degrade proprietors by showing such extreme suspicion of their motives. The previous year an inquisition at Acomb House, York, on Mrs Turner commented adversely on the conduct of Mr Metcalf, the proprietor, for offensive language and improper behaviour. Procter however commented that he was sorry for the man 'who has had to deal with a woman of a decided character

... in many ways'.¹¹¹ Ultimately, it was this sympathy, that led to open opposition from the private sector.

The network existing between licensed houses and private practitioners in lunacy found physical form only in Sir Alexander Morison's Society for the Protection of the Insane.¹¹² This organization provided a forum for doctors who espoused a certain amount of restraint and heavily endorsed single lodgings, many of which were illegal. These men regularly exchanged patients, in the sort of trade deprecated at the time, and included amongst their number many leading metropolitan madhouse owners.¹¹³ Many proprietors also met up in other societies, including the Asylum Officers Association.¹¹⁴ Most of the major London alienists, and others less well known, had consulting rooms in the area between Mayfair and Regents Park, and regularly made joint consultations, sharing the work around.

There were several satellite organizations on the fringes of this network, none of which came under the board's control. Chapman and Potters provided servants and nurses for asylums, and Messrs Lara and Lane, founded in 1828, advertised themselves as 'Medical Agents and Lunatic Asylum Registrars'.¹¹⁵ In 1851 they announced the opening of a registration office, with a view to establishing a medium of communication and negotiation between proprietors and friends of the insane. They proposed collating a list of good asylums and competent attendants which would be open to the public. In doing this, they deliberately usurped the board's role, stating that because of their inquisitional manner in trying to establish a register of attendants they had 'forfeited the confidence of those parties they had invited to cooperate with them'. They also expressed surprise that the proprietors hadn't formed their own association before and suggested that they should unite: 'Union is strength. The Central Office of Registration now proposed may form a *point d'appui* ... a nucleus around which such an association might be organised'.¹¹⁶

Some proprietors preferred, however, to raise a spirit of resistance through the more official medium of the Asylum Officers Association. Although outnumbered within this organization, they exerted considerable influence on its proceedings. In 1856 the board issued a circular asking for details of the amounts received by proprietors for patients' accommodation to ascertain if they were correctly provided for from their estates. A group of proprietors set up a committee in response, to monitor implementation of the laws, and obtained a judgement from the Solicitor General to the effect that this request for information was illegal.¹¹⁷ This decision did not stop the commission pressuring owners for these details, and they continued to threaten them with the loss of their licence if it was felt they were milking their patients financially, without providing proper care. Unfortunately, this weapon was not open to them when they approached doctors concerning the system of private lodgings.

Under the new Act in 1845, Ashley, Mylne, and Turner formed a private committee to deal with patients cared for in lodgings.¹¹⁸ In response to a circular they found only twenty-one patients still legally registered under

certificates, and further circulars asking for returns met with a stony silence.¹¹⁹ Clearly they needed to establish how widespread this form of care was, in order to initiate regulations governing it, but from the outset they failed to impose themselves on the situation. In 1845, the board informed Samuel Newington of Goudhurst, Kent, that he did not require an official casebook to record his single patient, an act which immediately placed single patients on a different footing from all others, except workhouse lunatics, where the same problems of identification and registration subsequently arose.¹²⁰ This was despite the fact that the Act specifically mentioned a medical visitation book. In referring to the visitation of these patients, Shaftesbury implied that it was troublesome and done of the board's 'own free will'. Certainly the Act did not lay a specific duty on the commissioners, and they did have many other responsibilities, but this is symptomatic of their approach. The penalty of this reluctance to structure a systematic registration and visitation was open defiance from practitioners.

The career of Alexander Morison¹²¹ provides a good example of how single lodgings, although connected to the network of private asylums, remained beyond the commission's reach. Morison never owned an asylum, but his practice revolved around them. In the 1830s he referred patients to Elm Grove and Southall Park, was visiting physician at these houses, and also Earls Court House and London House.¹²² He was able to place recovered patients out into lodgings from these asylums, and also move them back if they relapsed. Like many doctors however he failed to notify the commission of these transfers. Private lodgings were the ideal form of care for wealthy families, as they avoided the stigma of asylum admission, allowed a greater degree of family contact and, above all, were secret. Unfortunately they were also used as a form of social control. Scull has described how paupers who crossed the boundaries of normalcy were incarcerated, and P. McCandless demonstrated a similar process in private asylums.¹²³ Single lodgings were used in the same way. Morison attended patients in lodgings who were victims of the mesmeric craze, wanted to contract undesirable marriages, or had joined fringe religious groups, and in several cases was given a specific brief by parents to straighten out their wayward children.¹²⁴ As his patients were rarely registered, they had no safeguards to their liberty at all, and with the increasing difficulty of confining these borderline cases in asylums, due to better certification procedures, it is tempting to speculate that the number of patients in single lodgings rose.

Most doctors saw the board's interest in these patients as an unwarrantable intrusion. E.J. Seymour, the former Metropolitan Lunacy Commissioner was among those who favoured lodgings with the right protections, but did not envisage these safeguards emanating from a government board. He believed lodgings were effectual only when the family were involved and helped care for the patient. This combined with regular medical attendance was the best way to obtain a cure.¹²⁵ He and Dr Winslow cared for Sir Robert Peel's brother in this way, without any notification to the

Board.¹²⁶ The latter's failure to enquire more closely into this system owed much to Ashley's reluctance to antagonize the moneyed classes, even though he knew that many lunatics spent weeks and months alone in the company of an attendant who provided little intellectual stimulation. In most lodgings, the new methods of moral treatment and non-restraint were ignored, and some patients kept under an excessive amount of restraint, owing to their violence.¹²⁷ If calm, a few were afforded greater latitude, with one of Morison's patients being allowed out to attend a temperance meeting on her own, where she was entrusted with a reclaimed drunkard. However, apart from dining with the family or occasional rides in a carriage, most patients received little in the way of moral treatment; rather, they were liberally supplied from the pharmacopoeia and bled.¹²⁸

The commission, although conscious of the system's deficiencies, proved unable to gather reliable statistics of the numbers involved. Morison refused to give accurate information concerning his activities when questioned,¹²⁹ and it was not until 1860 that the board acknowledged a widespread evasion of the law, stating that it had been sanctioned, 'if not suggested, by medical men in attendance upon insane patients who, from their position, could hardly be ignorant of its requirements'.¹³⁰ What the board failed to admit was that their initial reluctance to intervene had led to a growth in this form of care, most of which they were ignorant.

Like many practitioners, Morison endorsed from ten to twenty lodgings at a time, supplying many more with patients.¹³¹ Several housed more than one patient, which was illegal, and they were generally run by a widow or couple, with an attendant to care for the patient. Attendants were recruited from various sources, many approaching Morison having left other asylums. Most asylums had a 'call' list, and keepers on this could be sent out to lodgings at any time. Winslow, Sutherland, and Burrows were amongst the proprietors who used this, and it was not until the late 1850s that the board realized what was happening and attempted to prohibit 'call' lists. This was a precarious existence, as Burrows pointed out. Keepers who discharged themselves from the permanent service of an asylum, taking a single patient on full-time, risked the possibility of his recovery or death. In this situation they were effectively blacklisted by other proprietors who had been kept informed of the initial breach of contract with their former asylum.¹³² Some attendants, however, rose to the challenge.

Frederick Horne is a good example of this type. He was placed out from Bethlem's 'call' list by Morison, but then went freelance using his relationship with Morison to secure a succession of patients.¹³³ This became a two-way process however as Horne obtained patients elsewhere and recommended Morison as the medical attendant to the relatives. In 1849 Morison recommended that Horne should get 31s. 6d. a week, and by 1850 he was charging two guineas a week to care for patients and four if it was at his cottage in Camberwell.¹³⁴ In 1859 Shaftesbury claimed that doctors were paying attendants a yearly stipend, supporting them when unemployed, but taking from two-thirds to three-quarters of their fees when they found

work.¹³⁵ This was untrue in Horne's case, although other less able attendants were undoubtedly used in this way.

It is difficult to estimate the number of single lodgings, but there were certainly well over the 115 recorded by the board in 1860. By that time, 6,000 pauper patients were registered as being in lodgings, most of whom lived in terrible conditions, and it is probable that from 1,500–2,000 private patients were kept in them as well.¹³⁶ Further evidence of their presence was the existence of a Keepers' Association at Lisson Grove in north London. Founded in 1840 to service the lodgings system, it was still flourishing in 1860, and seems to have attracted attendants blacklisted elsewhere.¹³⁷ Morison was most offended when two of their keepers demanded two bottles of wine each a week while caring for one of his patients. It is a measure of the board's failure to penetrate the private sector that they did not uncover this organization until nineteen years after its foundation, despite its unsavoury activities.¹³⁸ This failure was due in part to the medical profession, which systematically concealed its interest in private patients, but the board was also to blame for not acting decisively. Firms such as Lara and Lane were left to foment trouble, and it was only with the appointment of Gaskell and Wilkes that a more pragmatic approach was taken, in which powers were sought through parliament and individual asylums questioned more closely about their connection with lodgings. The board remained ambivalent though, concerning the private sector, and this, combined with the opposition of practitioners, led to a healthier dialogue than existed with the public sector. Ultimately, the proprietors' opposition to initial attempts at casting their houses in the mould of county asylums, combined with the limitations placed on their size, meant that they had more to offer in terms of a therapeutic environment, than the latter which lost their way and became vast repositories for chronic patients.

Conclusion

Examination of the board's evolution demonstrates that it had few Lamarckian qualities. Unable to adapt to change, the commissioners preferred to impose a model on psychiatry, one heavily influenced by Shaftesbury's evangelical outlook and developments at Hanwell. Selection of the board's personnel was crucial, and contributed much to its failings. In *Representative Government*, J.S. Mill espoused a degree of paternalistic rule only as a staging post on the way to a system employing more enlightened civil servants, who would express their opinions without fear of losing office.¹³⁹ Unfortunately, Shaftesbury's dominant position as chairman and the traditional perspectives inherited from previous inspectorates hampered individual commissioners, and prevented later appointees from challenging the collective orthodoxy. In 1859 Shaftesbury resisted enlargement of the board on the grounds that he could foresee a time 'when it would be almost impossible to carry on the business of the Commission, as it would be so

much in the nature of a debating society'.¹⁴⁰ Probably he was right to defend the commissioners' unique position, an inspectors and members of the executive, because in time they increasingly took control of the board's affairs. Whilst he remained active, however, much constructive dialogue was stifled by his desire to follow a 'middle road' in all things.

In this essay, I beg the question whether political theorists such as Bentham had any influence on the practical workings of the board,¹⁴¹ although it is clear that Lutwidge was a Chadwickian who applied the devastating test of utility to every aspect of their work.¹⁴² Rather, it is important to acknowledge that the commission evolved gradually, promoting internal change in its structure and methodology, initiating legislation and extending central control into the provinces, from a knowledge base founded on its field executives' experience. To understand why it developed into such an unimaginative organization, one must distinguish between explanations derived from its constitutional position and those based around its personnel. Clearly there were numerous constraints imposed by the Treasury and Home Office, but it was the limitation of its staff which compounded these.

Its most able professionals were lawyers, whose interest lay in administrative systems and legislative change. In these spheres the board rapidly became the acknowledged authority. As a leader in the field of scientific medicine however it left a lot to be desired. The early medical commissioners had no experience of managing large asylums, and would have been content to allow superintendents to develop their own regimes. It was the Home Office which insisted on uniformity, and the county superintendents were largely at fault in their failure to prepare a sound case defending individual practices. Nevertheless, the medical commissioners were also culpable in contributing to an atmosphere which discouraged research into the pathology of mental disease and promoted a lay perspective of lunacy. In the private sector, their leniency to proprietors delayed the imposition of effective controls until after the appointment of Gaskell and Wilkes.

By the 1870s, the board had developed a *modus operandi* that not only encouraged an unhealthy adherence to the Moloch of administrative perfectibility, but also carried in its train the seeds of a 'long sleep' for what had been an emerging professional group, the county asylum superintendents. As Huxley had foreseen, the commission's desire for authority had led to an intolerance of opposition which effectively curtailed growth. Only further research will reveal the full extent to which central authority came to dominate the practice of psychiatry.

Notes

1 R. Hunter and I. MacAlpine, *Three Hundred Years of Psychiatry 1535-1860* (London: Oxford University Press, 1963), pp. 451-56.

2 Madhouses became known as licensed houses or private asylums in the

- nineteenth century. The terms are interchangeable and have been used in this way throughout, although the former came to be used mostly in a pejorative sense.
- 3 These men will be referred to as the College commissioners hereafter.
 - 4 The Diaries of E.T. Monro, 1806–1833 (in private hands, Sevenoaks, Kent). These illustrate that many physicians who acted as commissioners, had patients at Monro's asylum, Brooke House. Among these were Halford, Powell, Tierney, Baillie, Heberden, Maton, Bree, and Hue to name but a few. Also Thomas Turner the future full-time commissioner, who dined often with Monro.
 - 5 Sir George Henry Rose (1771–1855), diplomatist. MP Southampton 1794–1813, Christchurch, Hampshire, 1818–44; Metropolitan Lunacy Commissioner 1828–31; Member of Commons' Select Committees concerning Lunacy, 1807, 1815, and 1827.
 - 6 PP 1814–15, IV, pp. 15–18.
 - 7 PP 1814–15, IV, pp. 27–30. Weir's suggestion was for one active citizen, one man of the law and one physician.
 - 8 *Times*, 20 June, 1814. XYZ attacked the College accusing its members of aggrandizement in promoting Rose's bills, which sought to widen its powers.
 - 9 G.M. Burrows, *Cursory Remarks on a Bill Now in the House of Peers for the Regulating of Madhouses* (London: T. and G. Underwood, 1817), pp. 19–22.
 - 10 University College London, Brougham MSS, 44208, Letter, Dillon to Lord Brougham 14 December, 1832. See also PP 1826–27, VI, pp. 57–60. Dillon was very critical of the College commissioners, and suggested public asylums managed by magistrates were the answer.
 - 11 House of Commons Journals, vol. 36, 1828, pp. 85, 411. Gordon was the only member of the select committee who helped prepare both bills.
 - 12 William Macmichael (1784–1839) MD 1816, 1822–31 Physician to the Middlesex Hospital; was on close terms with a number of madhouse owners, and from 1833–37 was a Lord Chancellor's Visitor to Chancery patients.
 - 13 For details of all the Metropolitan Lunacy Commissioners see Appendix A. Turner (1776–1865) has been confused with the surgeon Thomas Turner (1793–1873) who pioneered medical schools in Manchester, a mistake the former would not have found amusing. See D.J. Mellett, 'Bureaucracy and Mental Illness: The Commissioners in Lunacy 1845–90', *Medical History* (July 1981): biog. app.
 - 14 Lord Ashley, Spencer Perceval, Robert Gordon, Williams Wynn, Calthorpe, and Rose all became Metropolitan Lunacy Commissioners. Villiers did not.
 - 15 PP HL CCXXXVII, p. 1. Minutes of evidence taken before the Select Committee of the House of Lords to whom were referred the bill entitled An Act to Regulate the Care and Treatment of Insane Persons, p. 19.
 - 16 For further discussion see, A. Digby, 'Moral Treatment at the York Retreat' in this volume.
 - 17 PP HL CCXXXVII, pp. 99, 65, 102–03.
 - 18 9 Geo IV c. 41, ss. 2, 17, 20, 37, 29, 30, 32, 35, 38, and 44.
 - 19 Monro Diaries, 1828. Monro consulted regularly with Drs A.J. Sutherland, G.M. Burrows, E.L. Fox, G.G. Bompas, and J. Willis, all prominent madhouse owners. He called on Lord Malmesbury with Dr Willis, and himself approached the Lord Chancellor, Robert Gordon, the Bishop of Llandaff and the Home Secretary. Entries dated 17 March, 25 March, 3 April, 12 April, 29 April, 14 May, 16 May, and 17 May.
 - 20 S.W. Nicoll, *An Enquiry into the Present State of Visitation in Asylums for the*

Reception of the Insane and into the modes by which such visitation may be improved (London: 1828), p. 89.

- 21 British Museum Addit mss, Peel Papers, 40397 ff. 210-12, letter from Peel to G. Somerset, 2 August, 1828; see also Leicester County Record Office, Halford mss DG 24/872, Peel to Halford, 2 August, 1828.
- 22 Peel Papers, 40397 f. 206, letter from Peel to Gordon, 1 August, 1828; ff. 210-12, Peel to G. Somerset, 2 August, 1828. Peel, having informed Somerset of his inadvertent offer to Gordon, before receiving a reply from the latter, asked whether Somerset would accept the chairmanship if Gordon declined. He also had the nerve to ask if Somerset would serve under Gordon.
- 23 Halford mss, DG24/872 Letters from Peel to Halford, 2 August, 1828; Halford to Peel, 3 August, 1828 and 5 August, 1828. Peel asked for Halford's opinion on several doctors who had approached him for commissioners' posts, including A. Halliday, J.A. Gordon, and W. Lambe. Halford however recommended staunch College men; Turner, Bright, and Southey who were chosen, Macmichael and Hewett whom he later recommended to Brougham as Lord Chancellor's visitors of lunatics and four others.
- 24 The fellow magistrates suggested by Gordon, B. Bouverie, G.F. Hampson, and J. Clitherow, all had evangelical leanings.
- 25 For discussion of these see H.W. Parris, *Constitutional Bureaucracy: The Development of British Central Administration since the Eighteenth Century* (London: Allen and Unwin, 1969), pp. 84-90; also Sir N. Chester, *The English Administrative System 1780-1870* (Oxford, 1981), pp. 300-42.
- 26 1828-30, G. Somerset, Jr Ld of Treasury; 1830-32, F.T. Baring, Ld of Treasury; 1830-34, R. Vernon Smith, Jr Ld of Treasury; 1835-39, E.A. Seymour, 12th D. of Somerset, Ld of Treasury; 1839-41, R. Gordon, Sec. to Treasury; and 1841-45 J.M. Gaskell, Ld of Treasury.
- 27 Brougham, mss, 44556, letter from Ashley to Brougham, 20 February 1833; 43992, Ashley to Brougham, 20 May 1833.
- 28 Buckinghamshire County Record Office, Freemantle mss, D/FR/130/8, Secretary of the Lunatics Office to Sir T.F. Freemantle asking if he wished to continue in office as a Metropolitan Lunacy Commissioner, 29 August, 1832. In reply Freemantle stated that he hadn't fulfilled his duties because of pressure of parliamentary business.
- 29 The most important of these were Sir R. Inglis, commissioner 1833-35, Sir G. Grey 1833-34, and E.A. Seymour 1836-51.
- 30 John Haslam, *A Letter to the Metropolitan Commissioners in Lunacy containing some strictures on the Act of Parliament and observations on their Report* (London: 1830), pp. 3, 9.
- 31 Halford, mss, DG24/835/1 Report on and suggested regulations for the keeping of lunatics, n.d.
- 32 Halford mss, DG24/866/20, letter from Ld Brougham to Halford, 10 April, 1831.
- 33 Brougham mss, 33670 Letter from Shaftesbury to Brougham, 18 July, 1845. It is clear that the new legal commissioners rapidly applied pressure to become salaried, persuading Shaftesbury and Brougham to support this, but not G. Somerset. For this see Brougham mss, 43992, Shaftesbury to Mylne, 1 August, 1833 and Somerset to Shaftesbury, 10 August 1833. Also 44155, Mylne to Le Marchant, 2 November, 1832. Mylne wanted Le Marchant to inform Brougham that it might be out of his power, unless paid, 'long to continue an efficient member, without interfering with my other professional engagements'.

- 34 O MacDonagh, *A Pattern of Government Growth, 1800-60* (London: MacGibbon and Kee, 1961).
- 35 National Register of Archives, Diaries of the 7th Earl of Shaftesbury, SHA/PD/3, 15 November, 1844. The complete unfitness of William Godwin for this post badly dented Shaftesbury's confidence in his own judgement.
- 36 Edward Dubois (1774-1850). Barrister, wit, and man of letters. Contributor to the *Morning Chronicle and Observer*. Editor of several magazines. Secretary to the Metropolitan Lunacy Commission 1833-45. A Brougham appointee who kept the latter informed of the board's activities.
- 37 Brougham mss, 572 Letter Dubois to Brougham, n.d.; see also 585 Dubois to Brougham, n.d. Dubois remarked, 'in one thing [his principles] Lord Ashley has been duped. He understands and says that the Commissioners, Medical and Legal, shall devote their whole time to lunacy.... Now, I hear from those well informed on the subject that the Doctors mean to retain other offices and the Lawyers such practice as they may have.'
- 38 Brougham mss, 17962, Procter to Brougham, 22 July, 1845.
- 39 This included 21 county asylums, 11 hospitals, 96 provincial madhouses, 48 metropolitan madhouses, c. 750 workhouses, and 20 gaols. They were also empowered to visit Bethlem, and the military and naval hospitals with permission from the Home Secretary or Lord Chancellor. Thus totalling 949 institutions in all.
- 40 Shaftesbury Diaries, SHA/PD/4, 9 August, 1845.
- 41 Hansard 3rd. S, vol. 76, pp. 1257-264; also PP 1859, 1st Sess. III, pp. 64-5 and PP 1877, XIII, pp. 520-35.
- 42 S. Tuke, *Description of the Retreat, an Institution Near York for Insane Persons of the Society of Friends* (York: W. Alexander, 1813; reprint by Dawsons, London, 1964); J. Conolly, *The Construction and Government of Lunatic Asylums and Hospitals for the Insane* (London: John Churchill, 1847); and the essays of Andrew Scull and Anne Digby in these volumes.
- 43 Hansard 3rd. S, vol. 61, p. 806; PP 1859, 1st Sess. III, p. 23; and Journal House of Lords, 24 March, 1862.
- 44 H. Newington, 'Some Incidents in the History and Practice of Ticehurst Asylum' *Journal of Mental Science* 47 (1901): 70-1.
- 45 PP 1859, 1st Sess. III, pp. 7-10.
- 46 *The Journal of the Honorable H.E. Fox 1818-1830*, ed. The Earl of Ilchester (London: Thorton Butterworth, 1923), p. 131. Henry Edward Fox (1802-59), 4th Baron Holland, MP 1826-27, was an Oxford contemporary of Shaftesbury's. In 1820 he wrote, 'Ashley's character seems to me quite unintelligible and can only be accounted for by a dash of madness.' See also Mabel Countess of Airlie, *Lady Palmerston and Her Times*, 2 vols (London: Hodder and Stoughton, 1922), pp. 146-48. Florence Nightingale remarked that 'had he not devoted himself to reforming lunatic asylums, he would have been in one himself' (C. Woodham Smith, *Florence Nightingale 1820-1910* (London: Constable, 1950), p. 589).
- 47 Victoria and Albert Museum, Forster mss, 48/E/32, letter from Procter to Forster, 1865.
- 48 Shaftesbury Diaries, SHA/PD/5, 24 April, 1852, 13 July, 1852.
- 49 PP 1860, XXII, pp. 22-4.
- 50 Single patients: In law, it was illegal after 1828 to care for a single patient, unless they came under a Chancery Committee or it was not undertaken for profit, until an order and two medical certificates were obtained. These patients were cared

for in lodgings generally.

- 51 PP 1859, 1st Sess. III, pp. 59–60. In 1845 Shaftesbury raised only £1,200 after an appeal, and had to return the money to subscribers two years later.
- 52 Shaftesbury Diaries, SHA/PD/5, 13 July, 1849, 5 September, 1851. Before Select Committees Shaftesbury always gave evidence that he was opposed to the lodgings system.
- 53 Shaftesbury Diaries, SHA/PD/6, 1 June, 1852. Shaftesbury would occasionally take communion with Lutwidge. See also, Victoria and Albert Museum, Forster mss, 48/E/32, Procter to Forster, 26 October, 1858. Procter mentions doing a visit with Gaskell on a Sunday, contrary to the board's custom.
- 54 Michel Foucault, *Madness and Civilisation: A History of Insanity in the Age of Reason* (London: Tavistock, 1967), ch. 9; see also F. Godlee, 'Aspects of non-conformity', in this volume.
- 55 Shaftesbury Diaries, SHA/PD/4, 9 August, 1845.
- 56 Royal College of Physicians Edinburgh, Diaries of Sir Alexander Morison, 6 May, 1846.
- 57 *Journal of Mental Science* 3 (19), (October, 1856). Vote of Congratulation to R.W.S. Lutwidge.
- 58 Forster mss, 48/E/32, Procter to Forster, 21 July, 1863. Procter also spoke of his friendly relations with the Drs Mayo (Procter to Forster, 20 October, 1863).
- 59 The visitation books at all asylums illustrate how enquiries became more searching after 1856. The appointment of Lutwidge as a visitor also contributed to this.
- 60 In addition to those mentioned already Lutwidge owed his appointment to Shaftesbury whom he knew from the National Society for Promoting Religious Education and the Statistical Society. Hancock Hall to Lord Lyndhurst, and Campbell to Sir Robert Peel.
- 61 Samuel Gaskell, 'On the Want of Better Provision for the Labouring and Middle Classes when Attacked or Threatened with Insanity', *Journal of Mental Science* 6 (1860): 321–27.
- 62 John Charles Bucknill, 'Article Concerning the Eighth Report of the Irish Inspectors of Lunatic Asylums, 1857', *Journal of Mental Science* 4 (24) (1857). They advocated flue systems of ventilation and less hard labour for patients, in opposition to current board policies.
- 63 British Museum Add mss, Layard Papers, 34624 f. 523, letter from Procter to MacVey Napier, 13 July, 1844; Brougham mss, 24545, 10 January, 1863.
- 64 Forster mss, 48/E/32, Procter to Forster, 17 August, 1856.
- 65 PP 1859, 1st Sess. III, p. 2.
- 66 Forster mss, 48/F/65, Procter to Forster, 4 November, 1859.
- 67 R.A. Lewis, *Edwin Chadwick and the Public Health Movement, 1832–54* (London: Longmans, Green, 1952), pp. 7–26.
- 68 Shaftesbury Diaries, SHA/PD/4, 28 August, 1846. Haydock Lodge was a grossly overcrowded private asylum in Lancashire. Paupers were underfed and ill treated there, which resulted in a high mortality rate. Also its owners were implicated because they used their position as poor law officials to direct paupers there.
- 69 Forster mss, 48/E/32, Procter to Forster, 27 July, 1863.
- 70 Public Record Office (PRO), HO 45/OS/1452, letters from the Lunacy Commission to the Home Office, 19 May, 1846, 13 June, 1846, 24 June, 1846, and 5 September, 1846. See also HO 44/70 Home Office to Lunacy Commission, 3 November, 1845.

- 71 *The Lancet*, 13 January, 1849. Wakley suggested their weakness would lead to the profession losing its hold over insanity.
- 72 *The Medical Times*, no. 415 (September, 1847), pp. 573-74.
- 73 Home Office correspondence in HO 34 and HO 43 classes illustrates that both Graham and Grey (a former Metropolitan Lunacy Commissioner) made great efforts to impress magistrates and others that the board should be the final authority on most matters relating to lunacy.
- 74 James Huxley (1821-1907) MRCS 1843, LSA 1843, MD St Andrews 1844, Resident Medical Officer and Superintendent Kent County Lunatic Asylum 1846-1863. Brother of T.H. Huxley.
- 75 PROM H50/1, 3 September, 1846. This is the class containing the Lunacy Commission's minute books; see also HO 45/OS/1452, Lunacy Commission to the Home Office, 5 September, 1846.
- 76 Kent County Asylum Annual Report 1861-62, p. 33.
- 77 *Medical Circular* 4, no. 94: 279-80.
- 78 A. Scull, *Museums of Madness: The Social Organisation of Insanity in Nineteenth Century England* (London: Allen Lane, 1979), pp. 194-210, 226-33.
- 79 D.J. Mellett, *The Prerogative of Asylums* (New York: Garland Press, 1983).
- 80 PP 1847-48, XXXII, Appendix H.
- 81 The Lunacy Commissioners remedied this by inserting a clause in the Regulation of the Care and Treatment of Lunatics Act, 16 and 17 Vict., c. 96, s. 30 stipulating that charity and subscription hospitals must have their rules approved by the Home Secretary, which effectively meant, by them.
- 82 Most notably a register of all violent incidents.
- 83 The commission had had an earlier request for a special visit turned down by the Lord Chancellor in 1847, and had shelved further applications in 1848 and 1851 feeling they had insufficient evidence to justify them. It is perhaps not insignificant, that Shaftesbury's father, the 6th Earl, a governor of Bethlem and lifelong opponent of his son's activities, had died that summer. The commissioners' letter announcing their initial visitation, arrived the day after they did.
- 84 Bethlem Hospital, *The Report of the Commissioners in Lunacy to the Secretary of State, Together with a copy of the Evidence on which such report is stated to be founded* (London: Spottiswoode and Shaw, 1852), and the essay by Patricia Alderidge in this volume.
- 85 Scull, *Museums of Madness*, ch. 5 for the case of John Millar, sacked by the Buckinghamshire magistrates from their county asylum. He subsequently became the medical officer at Hoxton Madhouse.
- 86 For detailed discussion see, Charles Snape, *Wandsworth Asylum - A Letter to the Committee of Visitors of the Surrey County Lunatic Asylum* (London: 1856); Surrey County Asylum Fifteenth Annual Report, 1857.
- 87 For example Bucknill felt the board overemphasized the use of work (*J. Ment. Sci.* 1 (6) (July, 1854). He resented their praise of Samuel Hill's use of 'hard labour' at the North and East Ridings Asylum, suggesting that in future magistrates would be asking for superintendents with a recommendation from Mr Pusey's Agricultural College at Cirencester.
- 88 Kent County Record Office (KCRO), Q/GCL8 House Committee Minute Book Kent County Asylum, September, 1843-December, 1849. Entry for 15 May, 1847.
- 89 Lunacy Commissioners Seventeenth Annual Report 1863, PP, XX, pp. 74-78. In 1863, the magistrates claimed that they did not sanction these reports, although as

the commission pointed out, this was a meaningless statement, as they had been publishing them alongside their own for twenty years.

- 90 *J. Ment. Sci.* 4 (23) (October, 1857).
- 91 Kent Asylum Annual Report 1861-62, p. 29.
- 92 Of the sacked staff at Kent, seven were dismissed for leaving their patients unattended all night whilst out drinking, four for prostitution in Maidstone, three for playing cards in a corner of the suicide ward whilst a patient cut his throat, and several for sleeping whilst on night duty. Others were sacked for sending inexperienced staff out with large numbers of patients on their own, during the cold weather. KCRO, MH/Md2/As6.
- 93 The above statistics are based on Kent Asylum Servants Books. KCRO, MH/Md2/As6, 7, AS22.
- 94 PRO, MH51/44A. The Commission's case notes on the West Malling investigation.
- 95 KCRO, MH/Md2/As7, 24 September, 1879.
- 96 Hereafter referred to as the Asylum Officers Association.
- 97 Examination of family papers in Kent and Surrey shows the magistracy taking great interest before the 1860s. Several Surrey magistrates were also Bethlem or Hanwell governors, as were one or two Kent visitors. Five Surrey magistrates joined Sir A. Morison's Society for the Improvement of the Condition of the Insane, and at least two attended his lectures on insanity. Their correspondence confirms links with justices in other countries, for instance, the Hanwell bench writing about their method of non-restraint. See KCRO, Marsham mss, U1515, OQ, L1, Serjeant Adams to Lord Marsham, 7 December, 1839.
- 98 Royal College of Psychiatry, minute book of the Medico-Psychological Association, June 1841-October, 1892. See 1st meeting, 4 November, 1841, and subsequent meetings to 1856. In 1851, the Association's secretaries suggested that their scheme to distribute asylum reports abroad had been rendered unnecessary, by 'a more direct interchange that takes places between the British and American establishments'.
- 99 W.L. Parry-Jones, *The Trade in Lunacy: A Study of Private Madhouses in England in the Eighteenth and Nineteenth Century*, (London: Routledge and Kegan Paul, 1972), pp. 89-90.
- 100 Mellett, *Prerogative of Asylumdom*, ch. 4.
- 101 PRO, HO 45/OS/2222, Lunacy Commissioners to HO, 3 July, 1848. They suggest that legislation should be postponed concerning wandering lunatics, because there are other changes they want 'which the experience of the Commission in its working has suggested, and of which memoranda for that purpose have been carefully made'.
- 102 PRO, MH50/1, pp. 148-49, 23 January, 1846.
- 103 W.J. Corbet, 'Ought Private Lunatic Asylums to Be Abolished?', *Westminster Review* 142 (September, 1894): 378-80.
- 104 L. Weatherly, *A Plea for the Insane: The Case for Reform in the Care and Treatment of Mental Diseases* (London: Grant Richards, 1918), pp. 60-2.
- 105 Parry-Jones, *Trade in Lunacy*, pp. 88-9.
- 106 PRO, MH50/1, 8 October, 1846.
- 107 PRO, MH50/11, 7 November, 1860. Having finally managed to establish that the proprietors of Hoxton were the Lord Mayor John Carter, and Recorder of the City, Russell Gurney, the board renewed the licence for only four months, with a further renewal conditional on a full written statement detailing the exact duties

of every officer employed in the house, and to what extent they were under the control of the proprietors.

- 108 D. Roberts, *The Victorian Origins of the British Welfare State* (New Haven, Conn.: Yale University Press, 1960), ch. 4.
- 109 PP 1859, 1st Sess. III, pp. 34-5.
- 110 PRO, MH50/8, 27 August, 1856; see also MH50/9, 21 April, 1858. The board made renewal of Halliford House's licence conditional on discontinuation in the use of their 'seclusion' room; MH50/9, 23 March, 1858, Dr Finch of Fisherton House, Wilts, threatened through the magistrates, owing to his continued use of a 'ducking bath', water gruel as punishment for patients, and his infrequent ward rounds.
- 111 PP 1859, Sess. 2 VII, p. 47; Forster mss, 48/F/65, letter from Procter to Forster, 29 August, 1857.
- 112 Co-founded by Shaftesbury's father, this society contained six Bethlem governors and three Surrey Asylum visitors. Other wealthy patrons such as the Duke of Norfolk and the Earl of Arundel had relatives or friends who had been treated by Morison.
- 113 J. Purdie and E.L. Bryan (Hoxton), G.M. Burrows and J. Bush (Clapham Retreat), J.G. Millingen (York House), W.B. Costello (Wyke House), W. Wood and F. Philp (Kensington House), E.T. Monro (Brook House), A.J. Sutherland (Blacklands House), H.W. Diamond (Twickenham House), G.W. Daniell and Lady Ellis (Southall Park). There were also some provincial owners, including C. Summers (Great Forsters), G. Hitch (Sandywell Park), and J.B. Daniel (Bailbrook House). These men met regularly at Morison's house and elsewhere.
- 114 Other societies regularly used, were the Ethnological, the London Medical, the Royal Medical and Chirurgical, the Provincial Medical and Surgical Association, the Society for the Relief of Widows and Orphans of Medical Men, and the Royal Medical Benevolent College of which Shaftesbury was the chairman.
- 115 These agents were only four doors down from the Metropolitan Lunacy Commissioners' office in Adelphi Street, and round the corner from E.T. Monro's house.
- 116 *Medical Times* vol. 2 (May, 1851): 537-38.
- 117 *Medical Circular and General Medical Advertiser* vol. 9 (January, 1856): 8-9.
- 118 8 and 9 Vict., c. 100, s. 89. The fact that only three commissioners were empowered to be on this committee proved very inconvenient. In 1853 the board got this extended to all their members. See 16 and 17 Vict. c. 96, s. 27.
- 119 PRO, MH 51/236 Circular Letters Book No. 1, 1845-63. Circulars Nos. 3 and 5.
- 120 PRO, MH50/41 the Minute Book of the Private Committee, September, 1845-No. 1846, 25 September, 1845.
- 121 Sir Alexander Morison (1779-1863), visiting physician of Surrey Madhouses 1809-62, visiting physician Bethlem 1835-52 and Surrey County Asylum 1841-56. Remembered for his book on physiognomy and the fact that he initiated lectures for nurses. Also visiting physician at Hanwell, 1829-48.
- 122 Royal College of Physicians, Edinburgh, The Morison Diaries, 19 December, 1833, and diary for 1840. Elm Grove was owned by Mrs Wood, the sister-in-law of his colleague at Hanwell, Sir W. Ellis; Southall Park by Ellis himself, and then his widow.
- 123 Scull, *Museums of Madness*, pp. 201-04; P. McCandless, 'Liberty and Lunacy: The Victorians and Wrongful Confinement', in A. Scull (ed.), *Madhouses, Mad-doctors and Madmen: The Social History of Psychiatry in the Victorian Era*

- (London: Athlone Press, 1981); and the essay by John Walton in this volume.
- 124 Morison Diaries, 10 April, 1850, 4 September, 1844. In 1844, a Captain Greathorpe approached Morison about his daughter who wanted to marry a common soldier. He recommended Dr Belhomme in Paris who had an 'Institution for the children of parents who had difficulty in managing them'.
- 125 E.J. Seymour, *Thoughts on the Nature and Treatment of Several Severe Diseases of the Human Body* (London: Longman, Green, 1847), vol. 1, p. 216; Seymour (1796–1866) was a commissioner from 1830–38. He was also well known to Robert Nairne, a colleague at St George's Hospital and in private practice. He was appointed to the Metropolitan Lunacy Commission in 1857 amidst an outcry from the county asylum superintendents.
- 126 Peel, mss, 40609, ff. 149, 151, 208, 215, 221, 258, 259, 268, 277, 279, and 314. Correspondence relating to William Yates Peel (1789–1858).
- 127 The Reverend Howard whom Morison placed with an ex-Hanwell magistrate, Mr Trimmer, was under restraint almost continuously for eight years until moved to Ticehurst Asylum. In 1842 Morison recorded another patient as 'still requiring restraint, although nearly reduced to a skeleton and his back excoriated with sores', Morison Diaries, 11 November, 1842.
- 128 Many of Morison's private patients also had their heads shaven.
- 129 PRO, MH50/5, 10 July, 1851.
- 130 Lunacy Commissioners Fourteenth Annual Report, 1860, p. 68.
- 131 PP 1859, 1st Sess. III, p. 42. Shaftesbury claimed in 1859 that some great physicians controlled up to forty houses in this way. Morison supervised lodgings in Maidstone, Sevenoaks, Tonbridge, Gravesend, Canterbury, Plaistow, and Farley, and many in London. He would also obtain patients for doctors, clergymen, and others to care for at home, most of whom were not registered.
- 132 George Man Burrows, *Cursory Remarks on a Bill Now in the House of Peers for the Regulation of Madhouses* (London: Underwood, 1817), p. 83.
- 133 Lunacy Commissioners Seventh Annual Report, PP. 1852–53, XLIX, pp. 30–2. The commission prosecuted another Bethlem attendant set up in this way by Morison.
- 134 Morison Diaries, 27 October, 1849 and 8 December, 1850. See also *The Medical Directory*, part 2, 1848, p. 28 in the advertisement section; Horne even made two attempts to obtain a licence for several patients, MH50/11, 31 October, 1860 and 13 December, 1860.
- 135 *The Lancet* 1, 2nd ser. (23 January, 1847): 82. In fact Wakley had highlighted this system some years earlier. Wakley who had a nephew under Morison's care in Elm Grove, was always a stern opponent of the worst practices in the private sector, although supporting it generally.
- 136 This figure is a very rough estimate. Chancery Bonds (PRO/J/103/1–3) illustrate that 50 per cent of Chancery patients were in lodgings, that is 300. There were 117 officially registered lodgings. Almost all 186 licensed houses in the country had four or five former patients in lodgings, c. 840 patients. Many other practitioners, clergymen and others were also looking after patients as is evidenced by advertising in *The Times* and other newspapers.
- 137 In the advertisements section of the *Medical Directory*, 1847, p. 25, the Association begged leave 'to return their sincere thanks to the gentlemen of the medical profession and the public for their liberal patronage'. See also *Medical Directory*, 1857, p. 23, advertisements section.
- 138 PP 1859, 1st Sess. III, pp. 189–90.

- 139 J.S. Mill, *Considerations on Representative Government* (London: Longmans, Green, 1861), pp. 334-35.
- 140 PP 1860, XXII, pp. 22-33.
- 141 For discussion of this issue see, S.E. Finer, 'The Transmission of Benthamite Ideas 1820-50', in G. Sutherland (ed.), *Studies in the Growth of Nineteenth Century Government* (London: Routledge and Kegan Paul, 1972); cf., *inter alia*, O. MacDonagh, 'The Nineteenth Century Revolution in Government: A Reappraisal', *Historical Journal* 1 (1958): 52; H. Parris, 'The Nineteenth Century Revolution in Government: Reappraisal Reappraised', *Historical Journal* 3 (1960).
- 142 Other members of the board were well aware of Benthamite traditions. Shaftesbury through Chadwick; Forster from his vast collection of pamphlets on them; Vernon-Smith, Seymour, and Lutwidge via the Statistical Society. In many respects, Procter believed that Lutwidge with his numerous ideas created extra drudgery for the board, although it is also true that he elevated the position of secretary almost to that of a seventh full-time commissioner making visitations, interviewing at the board, representing them in court and helping devise legislation. In this sense he was in the mould of Chadwick, Kay Shuttleworth, and Horner, rather than the mere clerk pictured by David Roberts, *Victorian Origins of the Welfare State*, p. 239.

Appendix A

Lunacy Commissioners' and secretaries' length of service.

Medical commissioners: John Robert Hume (1845-57), Henry Herbert Southey (1845), Thomas Turner (1845-56), James Cowles Prichard (1845-48), Samuel Gaskell (1848-66), James Wilkes (1856-78), Robert Nairne (1857-83).

Legal commissioners: John Hancock Hall (1845), William George Campbell (1845-78), Bryan Waller Procter (1845-61), James William Mylne (1845-55), Robert Wilfred Skeffington Lutwidge (1855-73), John Forster (1861-72).

Secretaries: Lutwidge (1845-55), Forster (1855-61).

Lay commissioners: Lord Shaftesbury (chairman) (1845-85), Edward Adolphus Seymour, 12th Duke of Somerset (1845-52), Robert Gordon (1845-64), Robert Vernon Smith, Baron Lyveden (1845-72), Francis Barlow (1845-79), Colonel Henry Morgan Clifford (1853-84).

BIOGRAPHIES

MEDICAL

John Robert Hume (1781-1857). MD St Andrews 1816, LRCP 1819, FRCP 1836. Physician to Wellington during the Peninsular War and on return to England. Inspector General of Hospitals 1818-21. Private practice in London. Metropolitan Lunacy Commissioner 1828-45.

Thomas Turner (1776-1865). Educated Charterhouse and Göttingen. MB Cantab 1799, MD 1804, MRCP 1804, FRCP 1805, Treasurer RCP 1822-45. Physician St Thomas's Hosp. 1802-16. Physician Extraordinary to Queen Adelaide 1830-49. Metropolitan Lunacy Commissioner 1828-44.

Henry Herbert Southey (1783-1865). Younger brother of Robert Southey. MD

Edin. 1806, FRCP 1823, FRS 1825. Practices in Durham and London. Physician Middlesex Hospital 1815–27. Physician to George IV and Queen Adelaide. Metropolitan Lunacy Commissioner 1828–45.

James Cowles Prichard (1786–1848). MD Edinburgh 1808, Physician St Peter's Hospital, Bristol 1811–21 and to the Bristol Infirmary 1814–45. Private practice in Bristol. Famous ethnologist and President of the Ethnological Society. FRS 1827. From a Quaker background, Prichard was a committed Christian. Member of the Association of Medical Officers of Asylums and Hospitals for the Insane 1841–45. Metropolitan Lunacy Commissioner 1841–45. Author, *A Treatise on Diseases of the Nervous System*, 1822; *A Treatise on Insanity and Other Disorders Affecting the Mind*, 1835; *On the different Forms of Insanity in Relation to Jurisprudence*, 1842.

Samuel Gaskell (1807–96). Born Warrington. Educated locally owing to reduced family circumstances. Despite discouragement because of eye weakness, completed medical education at Manchester and Edinburgh after initial apprenticeship to a Liverpool bookseller. Resident MO Stockport Cholera Hosp. 1832–34, RMO Manchester Royal Infirmary and Lunatic Asylum 1834–40, medical superintendent Lancaster Moor Asylum 1840–48, where he abolished restraint. Retired in 1865 after a street accident. Pioneer in work with the mentally handicapped.

James Wilkes (1811–94). LSA 1834, MRCS 1835, FRCS 1854. Studied General Hospital Birmingham and Kings College London. RMO Staffs County Lunatic Asylum 1841–56. Member of Commission of Inquiry into State of Lunatic Asylums in Ireland. Honorary Lunacy Commissioner 1878–94.

Robert Nairne (1804–87). Educated Edinburgh and Trinity College, Cambridge MB 1832, MD 1837, FRCP 1838. Physician St George's Hospital 1839–57, an institution with evangelical sympathies. Appointed by Lord Chancellor Cranworth, a governor of the hospital (as were Robert Gordon and Sir George Grey, the Home Secretary). Moderate private practice as well. Treasurer of the Royal Medical and Chirurgical Society. Member of the deputation of private asylum owners and private practitioners to the Home Secretary in 1853, concerning the lunacy bills.

LEGAL

John Hancock Hall (1797–1845). Eldest son of Revd John Hancock Hall LLB, Risley Hall, Derbyshire. Admitted MT 1817, Barrister 1825. Metropolitan Lunacy Commissioner 1842–45.

William George Campbell (1810–81). Barrister MT 1836, Special Pleader 1838–43, Northern Circuit 1843–45. A protégé of the Duke of Argyll, who tried to obtain a post as assistant solicitor to the Excise for him in 1845. A convinced churchman. Honorary Lunacy Commissioner 1878–81.

Bryan Waller Procter (1797–1874). Born Leeds. Educated Finchley and Harrow. Articled to a solicitor in Calne, Wiltshire. Barrister G.I. 1831. Mostly practised in conveyancing. Began contributions to the *Literary Gazette* in 1815. Minor poet, pseudonym Barry Cornwall. Friend of Leigh Hunt, Lamb, Hazlitt, Landor, Carlyle, Swinburne, Coleridge, Macaulay, Dickens, and Browning. Metropolitan Lunacy Commissioner 1832–45, Honorary Lunacy Commissioner 1861–74. Author, *Dramatic Scenes and Other Poems*, 1819; *Poetical Works*, 1822; *English Songs*, 1832; *Memoir of Lamb*, 1866.

James William Mylne (1800–55). Educated Glasgow Grammar, Glasgow University and Balliol, Oxford. Barrister L.I. 1827. Metropolitan Lunacy Commissioner 1832–45. Co-author, with Benjamin Keen, of *Reports of Cases in the High Court of Chancery* 1832–35, 3 vols, 1834–37; and, with R.D. Craig, *Report of Cases in The*

High Court of Chancery, 1835-48, 5 vols, 1837-48.

Robert Wilfred Skeffington Lutwidge (1802-73). From an established county family in Cumberland. Educated St John's Cambridge. Barrister L.I. 1827. Auditor of the National Society for Promoting Religious Education 1828-43. Member of the Statistical Society from its foundation in 1834. Pioneer photographer and favourite uncle of Lewis Carroll. Lutwidge and Carroll shared their interest with Dr Diamond of Surrey County Asylum. Metropolitan Lunacy Commissioner 1842-45. Member of Commission of Enquiry into the State of Lunatic Asylums in Ireland 1856. Killed by a patient while visiting Fisherton House, Salisbury, Wiltshire.

John Forster (1812-76). Son of a Newcastle butcher and cattle dealer. Educated Newcastle Grammar School, University College, London. Barrister I.T. Drama critic *True Sun* 1832. Editor *Foreign Quarterly Review* 1842-43; *Daily News* 1846; *Examiner* 1847-55. Prolific writer, moved in Dickens's circle. A good friend of Lord Shaftesbury. Author *Lives of the Statesmen of the Commonwealth*, 5 vols, 1836-39; *Life and Adventures of Oliver Goldsmith*, 1848; *Life of Charles Dickens*, 1872. Winslow recalled him as 'severe and blunt' but 'sympathetic'.

LAY COMMISSIONERS

Anthony Ashley Cooper, 7th Earl of Shaftesbury (1801-85). Educated Harrow and Christ Church, Oxford, BA 1823, MA 1832, DCL 1841. Styled Lord Ashley 1811-51. MP Woodstock 1826-30, Dorchester 1830-31, Dorset 1831-46. Commissioner of the Board of Control 1828-30. Lord of the Admiralty 1834-35. Metropolitan Lunacy Commissioner 1828-45. Ecclesiastical Commissioner 1841-47. MP Bath 1847-51. Chairman of the Ragged School Union 1843-82. Lord Lieutenant. Dorset 1856-85. Commissioner on the Board of Health 1848-54.

Edward Adolphus Seymour, 12th Duke of Somerset (1804-85). Educated Eton and Christ Church, Oxford. Styled Lord Seymour until his father's death in 1856. MP Okehampton 1830-31, Totnes 1834-55. Lord of the Treasury 1835-39. Secretary to the Board of Control 1839-41. First Commissioner of Woods and Forests (and *ex officio* President of the Board of Health, where he clashed with Shaftesbury) 1849-52. Metropolitan Lunacy Commissioner 1836-45. Lord Lieutenant. Devon. Author, *Christian Theology and Modern Scepticism*, 1872; *Monarchy and Democracy*, 1880.

Robert Gordon (1786-1864) Born Kirkcudbrightshire, Educated Christ Church, Oxford, BA 1808. MP Wareham 1812-18, Cricklade 1818-37, Windsor 1837-41. A committed Whig, known as the Dorsetshire Joseph Hume. Commissioner of the Board of Control 1832-33, secretary 1833-34 and 1835-39. Secretary to the Treasury 1839-41. Metropolitan Lunacy Commissioner 1828-45. Governor of St Luke's Hospital for the Insane and St George's Hospital.

Robert Vernon Smith, Baron Lyveden (1800-73). Educated Eton and Christ Church, Oxford, BA 1822. Student at I.T., but never called to the Bar. MP Tralee 1829-31, Northampton 1831-59. Jr. Treasury Minister 1830-34. Joint Secretary to the Board of Control 1835-39, Under-Secretary of State for War and Colonies 1839-41. President of the Board of Control 1855-58. Deputy Lieutenant Northampton. Metropolitan Lunacy Commissioner 1828-45.

Francis Barlow (1799-1887). Educated Trinity Hall, Cambridge, BA 1821, MA 1824. Barrister M.T. 1825, L.I. 1837. Also a Master in Lunacy under the Lord Chancellor. Appointed to liaise between the two offices. Honorary Lunacy Commissioner 1879-87.

Henry Morgan Clifford (1806–84). Educated Eton and Christ Church, Oxford. Chairman of the Hereford Quarter Sessions 1845. MP Hereford 1847–65. Colonel of the Monmouth Militia.